| Fill in this information to identify your case: | | |
|---|--|--------------------------------------|
| United States Bankruptcy Court for the : | | |
| NORTHERN District ofILLINOIS(State) | | |
| Case Number (If known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | It 1: Identify Yourself | | |
|----|--|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or | Joaquin First name | Patricia First name |
| | passport). | Middle name | Middle name |
| | Bring your picture | Ruacho-Hernandez | Medrano |
| | identification to your meeting with the trustee. | Last name | Last name |
| | | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | | Patricia |
| | have used in the last 8 years | First name | First name |
| | Include your married or | Middle name | Middle name |
| | maiden names. | | Ruacho |
| | | Last name | Last name |
| | | First name | First name |
| | | Middle name | Middle name |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your Social Security | XXX - XX1453 | xxx - xx2905 |
| | number or federal Individual Taxpayer Identification number | OR | OR |
| | | 9xx - xx | 9xx - xx |

Document Page 2 of 60 Ruacho-Hernandez

Case Number (if known)

Middle Name **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): Any business names and Employer I have not used any business names or EINs. I have not used any business names or EINs. **Identification Numbers** (EIN) you have used in Business name Business name the last 8 years Include trade names and Business name Business name doing business as names EIN EIN Where you live If Debtor 2 lives at a different address: 4844 W. Augusta Blvd Number Street Number Street Chicago IL 60651 City State ZIP Code City ZIP Code COOK County County If your mailing address is different from the one If Debtor 2's mailing address is different from above, fill it in here. Note that the court will send the one above, fill it in here. Note that the court any notices to you at this mailing address. will send any notices this mailing address. Number Number Street Street P.O. Box P.O. Box ZIP Code ZIP Code City State City State Check one: Check one: Why you are choosing this district to file for Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, bankruptcy. I have lived in this district longer than in any I have lived in this district longer than in any other district. other district. have another reason. Explain. I have another reason. Explain. See 28 U.S.C. § 1408 (See 28 U.S.C. § 1408

Joaquin

Debtor 1

Dogument Page 3 of 60

Joaquin Case Number (if known) Debtor 1 Part 2: **Tell the Court About Your Bankruptcy Case** Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals The chapter of the Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Bankruptcy Code you are choosing to file Chapter 7 under ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No bankruptcy within the $_{\text{District}} \ \ \text{None}$ last 8 years? ☐ Yes. __ When ___ MM / DD / YYYY District None __ When ____ ___ Case Number ___ MM / DD / YYYY When MM / DD / YYYY No 10. Are any bankruptcy cases pending or being filed by a spouse who is Yes. not filing this case with _____ When ____ Case Number, if known _____ you, or by a business MM / DD / YYYY parter, or by affiliate? Debtor _ Relationship to you _ When District Case Number, if known MM / DD / YYYY 11. Do you rent your ☐ No. Go to line 12 residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

No. Go to line 12.

| Joaquin | D | Document Page 4 of Ruacho-Hernandez | | Case Number <i>(if known)</i> | |
|------------|-------------|-------------------------------------|--|-------------------------------|--|
| First Name | Middle Name | Last Name | | | |

| | First Name | Middle Name | Last Name | , |
|-----------------------|--|-------------------------------------|---|--|
| Part : | 3: Report About Any Busin | esses You Ow | n as a Sole Proprietor | |
| c | Are you a sole proprietor of any full- or part-time ousiness? | ■ No. □ Yes. | Go to Part 4. Name and location of business | |
| b ii s | A sole proprietorship is a business you operate as an ndividual, and is not a separate legal entity such as a corporation, partnerhsip, or | | Name of business, if any | |
| li s | LC. f you have more than one color proprietorship, use a separate sheed and attach it to this petition. | | Number Street | |
| | | | City | State Zip Code |
| | | | Check the appropriate box to describe your business: | |
| | | | ☐ Health Care Business (as defined in 11 U.S.C. § 101(2 | 27A)) |
| | | | ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 10 | 01(51B)) |
| | | | ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A)) | |
| | | | Commodity Broker (as defined in 11 U.S.C. § 101(6)) | |
| | | | ☐ None of the above | |
| E a C F | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). | appropria balance s document No. I | filing under Chapter 11, the court must know whether you are to deadlines. If you indicate that you are a small business debineet, statement of operations, cash-flow statement, and feders do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). am not filing under Chapter 11. am filing under Chapter 11, but I am NOT a small business dhe Bankruptcy Code. am filing under Chapter 11 and I am a small business debtor Bankruptcy Code. | otor, you must attach your most recent ral income tax return or if any of these . better according to the definition in |
| Part | Report if You Own or Ha | ave Any Hazard | ous Property or Any Property That Needs Immediate Attention | |
| r c | Do you own or have any property that poses or is alleged to pose a threat of imminent and | No. | What is the hazard? | |
| F i i F E | indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building | | If immediate attention is needed, why is it needed? | |
| τ | hat needs urgent repairs? | | Where is the property? | |
| | | | | |
| | | | | |

Debtor 1

Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Document Page 5 of 60

Joaquin

Part 5:

Debtor 1

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing a | about |
|---|-------|
| credit counseling because of: | |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

> to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case Number (if known)

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. approved You must file a certificate from the agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to rece | ive a briefing about |
|---------------------------|----------------------|
| credit counseling because | se of: |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

> to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Debtor 1 | Joaquin | | Ocument Page 6 01 6 Ruacho-Hernandez | U Case Number (if known) |
|----------|------------|-------------|---|---------------------------------|
| | First Name | Middle Name | Last Name | |

| Pa | rt 6: Answer These Questions | for Reporting Purposes | | | |
|---------|--|--|---|---|--|
| 17. | What kind of debts do you have? Are you filing under Chapter 7? Do you estimate that after | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. No. I am not filing under Chapter 7. Go to line 18. Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? | | | |
| | any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | ■No. □Yes. | as are para that rands will be available to dist | isuae to unsecured dieditors: | |
| 18. | How many creditors do you estimate that you owe? | ■ 1-49 □ 50-99 □ 100-199 □ 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 | |
| 19. | How much do you estimate your assets to be worth? | □ \$0-\$50,000 ■ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | ☐\$500,000,001-\$1 billion ☐\$1,000,000,001-\$10 billion ☐\$10,000,000,001-\$50 billion ☐More than \$50 billion | |
| 20. | How much do you estimate your liabilities to be? | ☐ \$0-\$50,000 ■ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | ☐\$500,000,001-\$1 billion ☐\$1,000,000,001-\$10 billion ☐\$10,000,000,001-\$50 billion ☐More than \$50 billion | |
| Pa | rt 7: Sign Below | | | | |
| For you | | correct. If I have chosen to file under Chap of title 11, United States Code. I ununder Chapter 7. If no attorney represents me and I this document, I have obtained and I request relief in accordance with I understand making a false stater with a bankruptcy case can result | I declare under penalty of perjury that the infector 7, I am aware that I may proceed, if eligible inderstand the relief available under each charmond of the pay or agree to pay someone who is did not pay or agree to pay someone who is diread the notice required by 11 U.S.C. § 342 the chapter of title 11, United States Code, soment, concealing property, or obtaining mone in fines up to \$250,000, or imprisonment for the did 3571. | ple, under Chapter 7, 11,12, or 13 pter, and I choose to proceed not an attorney to help me fill out 2(b). pecified in this petition. y or property by fraud in connection | |
| | | ### 18 U.S.C. §§ 152, 1341, 1519, and ### Is/ Joaquin Ruacho-F Signature of Debtor 1 Executed on | Hernandez | Patricia Medrano ature of Debtor 2 suted on 07/06/2017 MM / DD / YYYY | |

Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Document Page 7 of 60

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Joseph Mark D'Onofrio Signature of Attorney for Debtor | Date | Date: 07 | |
|---|-------------|-----------------|---------|
| Joseph Mark D'Onofrio | | | |
| Printed name | | | |
| Geraci Law L.L.C. | | | |
| Firm name | | | |
| 55 E. Monroe St., #3400 | | | |
| Number Street | | | |
| Number Street | | | |
| Number Cirect | | | |
| Chicago | IL | 60603 | |
| | IL State | 60603 ZIP Co | ode |
| Chicago | State | ZIP Co | |
| Chicago | State | ZIP Co | ode |
| Chicago | State | ZIP Co | |

Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Document Page 8 of 60

| Fill in this in | formation to ident | | |
|---------------------------|--------------------|-----------------------------------|------------------------------|
| Debtor 1 | Joaquin | | Ruacho-Hernandez |
| | First Name | Middle Name | Last Name |
| Debtor 2 | Patricia | | Medrano |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| | . , | the : <u>NORTHERN</u> District of | _ <u>ILLINOIS</u> (State) |
| Case Number (If known) | · | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Part 1: | Summarize Your Assets | |
|----------|---|---|
| | | Your assets Value of what you own |
| | e A/B: Property (Official Form 106A/B) t line 55, Total real estate, from Schedule A/B | \$0 |
| 1ь. Сору | line 62, Total personal property, from Schedule A/B | \$ 55,287 |
| 1c. Copy | line 63, Total of all property on <i>Schedule A/B</i> | \$ 55,287 |
| | Summarize Your Liabilities | |
| Part 2: | Summarize Four Liabilities | Your liabilities Amount you owe |
| | e D: Creditors Who Have Claims Secured by Property (Official Form 106D) the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$32,462 |
| | e E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$0 |
| 3ь. Сору | the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$34,090 |
| | | |
| Part 3: | Summarize Your Liabilities | |
| | e I: Your Income (Official Form 106I) ur combined monthly income from line 12 of Schedule I | \$3,639.76 |
| | e J: Your Expenses (Official Form 106J) sur monthly expenses from line 22c of Schedule J | \$4,352.35 |

Case Number (if known)

Document Page 9 of 60

Answer These Questions for Administrative and Statistical Records Part 4: 6. Are you filing for bankruptcy under Chapter 7, 11 or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$5,760.33 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 of Schedule E/F, copy the following: \$ 0.00 9a. Domestic support obligations (Copy line 6a.) \$ 0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) $_{0.00}$ 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) \$ 0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as \$ 0.00 priority claims. (Copy line 6g.) \$ 0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) \$_0.00 9g. Total. Add lines 9a through 9f.

Debtor 1

Joaquin

Middle Name

First Nam

| | | | | ed 07/17/17 15:59:28 | Desc Main |
|--|---|--|---|---|--|
| Fill in this in | formation to identify yo | ur case and this fi | iling: | 0 of 60 | |
| Debtor 1 | Joaquin | | Ruacho-Hernandez | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | Patricia | | Medrano | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the : _ | NORTHERN Dist | trict of _ <u>ILLINOIS</u> | | |
| Case Number | | | (Sidio) | | Check if this is an |
| (If known) | 4004/7 | | | J | amended filing |
| <u>)fficial F</u> | orm 106A/B | | | | |
| chedul | e A/B: Prope | rty | | | 12/15 |
| ntegory where sponsible for ages, write yo | you think it fits best. B supplying correct infor ur name and case numb | e as complete and mation. If more sp per (if known). Ans | an asset only once. If an asset fits in mo l accurate as possible. If two married peo lace is needed, attach a separate sheet to swer every question. Other Real Esate You Own or Have an Inter | ple are filing together, both are equa o this form. On the top of any addition | illy |
| No. Yes. Add the dol | Describe | you own for all of | in any residence, building, land, or simila your entries fro Part 1, including any ent | ries for pages | \$0.00 |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | φ0.00 |
| Part 2: | Describe Your Vehicles | | | | |
| No. Yes. | s, trucks, tractors, sport Describe | utility vehicles, m | ootorcycles | | |
| V | Лake: | Nissan | Who has an interest in the property? | | secured claims or exemptions. Put |
| N | Model: | Versa | Debtor 1 only | | any secured claims on Schedule D: Have Claims Secured by Property |
| Υ | /ear: | 2009 | Debtor 2 only Debtor 1 and Debtor 2 only | Current value | e of the Current value of the |
| A | Approximate Mileage: | 60,000 | At least one of the debtors and anoth | entire propert | ty? portion you own? |
| C | Other information: | | | \$ | 1,572.00 \$ 1,572.00 |
| I | 2009 Nissan Versa with omiles. | over 60,000 | Check if this is community prop instructions) | erty (see | |
| N | Лake: | Mitsubishi | Who has an interest in the property? | Check one Do not doduct | secured claims or exemptions. Put |
| | Model: | Montero | Debtor 1 only | the amount of | any secured claims on Schedule D: |
| | ∕ear: | 2005 | Debtor 2 only | | Have Claims Secured by Property |
| | | 120,000 | Debtor 1 and Debtor 2 only | Current value entire propert | |
| | Approximate Mileage: | | At least one of the debtors and anoth | ner | 2,200.00 c 1,100.00 |
| - | Other information: | | Check if this is community prop | \$ ertv (see | 2,200.00 \$ 1,100.00 |
| | 2005 Mitsubishi Montero 120,000 miles. | with over | instructions) | , | |
| | | | _ | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Official Form 106A/B Record # 741123 Schedule A/B: Property Page 1 of 7

Joaquin Case 17-21219 Doc 1 Filed 07/17/17

Puacho-Hernandez

Document

Last Name Debtor 1

Middle Name

Entered 07/17/17 15:59:28 Page 11 of 60 umber (if known) Desc Main

| P | art 2: | Describe Your Vel | nicles | | | |
|-------------|--------------------|---|--|--|---------------------------------------|---|
| _ | | _ | | any vehicles, whether they are registered or not? Include any also report it on Schedule G: Executory Contracts and Unexpire | | |
| 03. | Cars, vans | s, trucks, tractors | s, sport utility vehicles, m | otorcycles | | |
| | | Describe flake: flodel: | F-150 | Who has an interest in the property? Check one. Debtor 1 only | the amount of any secur | claims or exemptions. Put red claims on <i>Schedule D:</i> aims Secured by Property |
| | | ′ear: .pproximate Milea | 2016 age: 7,000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Current value of the entire property? | Current value of the portion you own? |
| | _ | Other information: | with over 7,000 miles | Check if this is community property (see instructions) | \$0,000.0 | 20,000.00 |
| 5. A | Examples: No. Yes. | Boats, trailers, moto Describe lar value of the p | ors, personal watercraft, fishin | ecreational vehicles, other vehicles, and accessories g vessels, snowmobiles, motorcycle accessories your entries fro Part 2, including any entries for pages | | \$ 22,672.00 |
| P | art 3: | Describe Your Per | sonal and Household Items | 5 | | |
| Do | you own o | r have any legal o | or equitable interest in an | ny of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 06. | | d goods and furn Major appliances, fi | uishings urniture, linens, china, kitchen | ware | | |
| 07 | Yes. | Describe | Furniture, linens, small applia | ances, table & chairs, bedroom set | \$1,000 | \$ <u>1,000.0</u> 0 |
| U7. | | Televisions and rad | dios; audio, video, stereo, and including cell phones, camera | digital equipment; computers, printers, scanners; music s, media players, games | | |
| | Yes. | Describe | Flat screen TV, Blu-ray palye | er, tablet, printer, gaming system and games, cell phone | \$1,000 | \$ <u> 1,000.0</u> 0 |
| 08. | | Antiques and figurir | nes; paintings, prints, or other collections; other collections, n | artwork; books, pictures, or other art objects; nemorabilia, collectibles | | |
| 09. | Yes. | Describe t for sports and I | hobbies | | | \$0.00 |
| . = • | Examples: | • | ic, exercise, and other hobby | equipment; bicycles, pool tables, golf clubs, skis; canoes | | |
| | Yes. | Describe | | | | \$ <u> </u> |
| 10. | Firearms Examples: | Pistols, rifles, shotg | guns, ammunition, and related | equipment | | |
| | Yes. | Describe | | | | \$ <u> </u> |

Debtor 1 Joaquin First Name Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Page 12 of 60 Last Name Page 12 of 60 Last Name

| 11. Clothes Examples: No. | Everyday clothes, | furs, leather coats, designer wear, s | hoes, accessories | | |
|--|-------------------------------|---|---|----------------|--|
| Yes. | Describe | Everyday clothes, shoes, accesso | ories | \$200 | \$ 200.00 |
| 12. Jewelry Examples: gold, silver No. | | costume jewelry, engagement rings, | , wedding rings, heirloom jewelry, watches, gems, | | |
| Yes. | Describe | Costume Jewelry | | \$100 | \$ <u>100.00</u> |
| 13. Non-farm a Examples: No. | animals Dogs, cats, birds, | horses | | | |
| Yes. | Describe | Family pets; 1 dog | | \$0 | \$ 0.00 |
| 14. Any other No. | personal and h | ousehold items you did not alr | eady list, including any health aids you did | not list | |
| Yes. | Describe | Books, CDs, DVDs & Family Photo Blood pressure monitor and gluco | | \$50 \$160 | \$ 210.00 |
| | | - | cluding any entries for pages you have attac | | \$2,510.00 |
| for Part 3. | Write that numb | oer here | | > | |
| Part 4: | Describe Your Fi | nancial Assets | | | |
| Do you own o | r have any legal | or equitable interest in any of | the following? | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| No. Yes. | Describe | | e deposit box, and on hand when you file your petition ates of deposit; shares in credit unions, brokerage h | | \$ <u> </u> |
| and other s | | If you have multiple accounts with th | | | |
| Yes. | Describe | Account Type: Savings Account | Institution name: Chase Bank | | \$5.00 |
| | | Checking Account | Chase Bank | | \$ 800.00 |
| | | publicly traded stocks tment accounts with brokerage firms | i, money market accounts | | \$ <u>805.0</u> 0 |
| Yes. | Describe | Institution or issuer name: | | | \$ 0.00 |
| 19. Non-public | cly traded stock | and interests in incorporated | and unincorporated businesses, including | an interest in | ş <u> </u> |
| Yes. | Describe | Name of Entity and Percent of | Ownership: | | \$ <u> </u> |
| Negotiable | instruments includ | - | and non-negotiable instruments s, promissory notes, and money orders. eone by signing or delivering them. | | |
| _ = | | | | | |

Joaquin Case 17-21219 Filed 07/17/17 Ruacho-Hernandez Document Doc 1 Debtor 1

First Name Middle Name

Entered 07/17/17 15:59:28 Page 13 of 60 umber (if known) Desc Main

| 21. | Retirement | or pension acc | counts | | | |
|-----|-------------------------|-----------------------|---|--|--|------------------|
| | Examples: | Interests in IRA, E | RISA, Keogh, 401(k), 403(b), thrift savings a | ccounts, or other pension or profit-sharing plans | | |
| | Yes. | Describe | Type of account and Institution name: | | | |
| | | | IRA | Fidelity | | 8,000.00 |
| 22 | Security de | posits and pre | navments | | \$ | <u>8,000.0</u> 0 |
| | Your share Examples: | of all unused depo | payments osits you have made so that you may continu andlords, prepaid rent, public utilities (electric | | | |
| | No. Yes. | Describe | Institution name or individual: | | _ | |
| 23. | Annuities (| A contract for a | a periodic payment of money to you, e | either for life or for a number of years) | \$ | 0.00 |
| | Yes. | Describe | Issuer name and description: | | ¢ | 0.00 |
| 24. | | | RA, in an account in a qualified ABLE (b), and 529(b)(1). | E program, or under a qualified state tuition program. | Ψ | |
| | Yes. | Describe | Institution name and description. Sepa | arately file the records of any interests.11 U.S.C. § 521(c): | \$ | 0.00 |
| 25. | Trusts, equ | uitable or future | interests in property (other than any | thing listed in line 1), and rights or powers | | |
| | Yes. | Describe | | | \$ | 0.00 |
| 26. | - | | marks, trade secrets, and other inteller ames, websites, proceeds from royalties and | • • • | | |
| | No. | | | | | |
| | Yes. | Describe | | | \$ | 0.00 |
| 27. | | | other general intangibles exclusive licenses, cooperative association ho | oldings, liquor licenses, professional licenses | | |
| | Yes. | Describe | | | \$ | 0.00 |
| | | | | | | |
| Мо | ney or prop | erty owed to yo | u? | | Current value of the portion you own? Do not deduct secured or exemptions | |
| | | | | | or exemptions | |
| 28. | No. | s owed to you | | | | |
| | Yes. | Describe | | | \$ | 0.00 |
| 29. | Examples: | - | sum alimony, spousal support, child support, | maintenance, divorce settlement, property settlement | | |
| | Yes. | Describe | | | \$ | 0.00 |
| 30. | Other amo | unts someone o | owes you | | | |
| | | | ability insurance payments, disability benefits id loans you made to someone else | s, sick pay, vacation pay, workers' compensation, | | |
| | Yes. | Describe | Potential workers' compensation claim | | \$ | 0.00 |
| 31. | | insurance polic | | A) and the boundary of the control o | | |
| | Examples: | ⊓eaitn, disability, d | or life insurance; health savings account (HS <i>i</i> Company Name & Beneficiary: | A); credit, homeowner's, or renter's insurance | | |
| | Yes. | Describe | Company Ivanie & Delicitolary. | | | |
| | | | | | \$ | 0.00 |

Page 4 of 7

Debtor 1 Joaquin First Name Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Page 14 of 60 model of 60 m

| 32. | If you are the property be | ne beneficiary of a lecause someone ha | at is due you from someone who has died iving trust, expect proceeds from a life insurance policy, or are currently entitled to receive as died. | ī | | |
|---|---|---|--|---|--------------------------------|---|
| 33. | Yes. | Describe ainst third partie | s, whether or not you have filed a lawsuit or made a demand for payment | \$_ | 0.00 | |
| | _ | - | ment disputes, insurance claims, or rights to sue | | | |
| 24 | Yes. | Describe | quidated claims of every nature, including counterclaims of the debtor and rights | \$_ | 0.00 | |
| 34. | No. | Describe | quidated claims of every flature, including counterclaims of the debtor and rights | 1 | | |
| | 165. | Describe | Expected class action settlement from JC Penny \$200 | \$_ | 200.00 | |
| 35. | Any financ | - | id not already list | 1 | | |
| | Yes. | Describe | | \$_ | 0.00 | |
| | | | of your entries from Part 4, including any entries for pages you have attached | | \$9,005.00 |] |
| ı | Part 5: | Describe Any Bus | iness-Related Property You Own or Have an Interest In. List any real estate in Part 1. | | | |
| 37. | Do you ow No. | n or have any le | gal or equitable interest in any business-related property? | | | |
| | Yes. | | | | | |
| | | | | Current value portion you on Do not deduct sor exemptions | own? | |
| 38. | | receivable or co | mmissions you already earned | portion you on Do not deduct s | own? | |
| | Accounts No. Yes. | Describe | | portion you on Do not deduct s | own? | |
| | Accounts No. Yes. | Describe | mmissions you already earned ngs, and supplies omputers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices | portion you on Do not deduct s | own? secured claims | |
| | Accounts No. Yes. Office equ Examples: | Describe | ngs, and supplies | portion you on Do not deduct s | own? secured claims | |
| 39. | Accounts No. Yes. Office equ Examples: No. Yes. | Describe ipment, furnishi Business-related co Describe , fixtures, equip | ngs, and supplies | portion you on Do not deduct so or exemptions | own? secured claims 0.00 | |
| 39. 40. | Accounts No. Yes. Office equ Examples: No. Yes. Machinery No. Yes. | Describe ipment, furnishi Business-related or Describe | ngs, and supplies omputers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices | portion you on Do not deduct so or exemptions | own? secured claims 0.00 | |
| 39. 40. | Accounts No. Yes. Office equ Examples: No. Yes. Machinery No. | Describe ipment, furnishi Business-related co Describe , fixtures, equip | ngs, and supplies omputers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices | portion you on Do not deduct so or exemptions | own? secured claims 0.00 | |
| 39. 40. | Accounts No. Yes. Office equ Examples: No. Yes. Machinery No. Yes. Inventory No. Yes. | Describe ipment, furnishi Business-related or Describe fixtures, equipt Describe | ngs, and supplies computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices ment, supplies you use in business, and tools of your trade | portion you on Do not deduct so or exemptions | own? secured claims 0.00 | |
| 39. 40. | Accounts No. Yes. Office equ Examples: No. Yes. Machinery No. Yes. Inventory No. Yes. | Describe ipment, furnishi Business-related or Describe fixtures, equipa Describe Describe | ngs, and supplies computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices ment, supplies you use in business, and tools of your trade | portion you on Do not deduct so or exemptions | 0.00 0.00 0.00 | |
| 39.40.41.42. | Accounts No. Yes. Office equ Examples: No. Yes. Machinery No. Yes. Inventory No. Yes. Interests in No. Yes. | Describe ipment, furnishi Business-related or Describe fixtures, equipa Describe Describe partnerships of | ngs, and supplies computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices ment, supplies you use in business, and tools of your trade r joint ventures | portion you on Do not deduct so or exemptions | 0.00 0.00 | |

Debtor 1 Joaquin First Name Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Page 15 of 60 Last Name Page 15 of 60 Last Name

| 44. Any business-related property you did not already list No. | |
|--|-----------------|
| Yes. Describe | \$ <u>0.0</u> 0 |
| 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here> | \$ 0.00 |
| Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. | |
| If you own or have an interest in farmland, list it in Part 1. | |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. | |
| Yes. Describe | \$ 0.00 |
| 47. Farm animals | Ψ |
| Examples: Livestock, poultry, farm-raised fish No. | |
| Yes. Describe | \$ <u>0.0</u> 0 |
| 48. Crops—either growing or harvested No. | |
| Yes. Describe | \$ <u>0.0</u> 0 |
| 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade | |
| Yes. Describe | 1 |
| 50. Farm and fishing supplies, chemicals, and feed | \$0.00 |
| No. | |
| Yes. Describe | \$ <u> </u> |
| 51. Any farm- and commercial fishing-related property you did not already list No. | |
| Yes. Describe | \$ <u>0.0</u> 0 |
| 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached | |
| for Part 6. Write that number here> | \$0.00 |
| Describe All Describe Ver Comment House or Internation Thank Ver Comment of the C | |
| Describe All Property You Own or Have an Interest in That You Did Not List Above | |
| 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership | |
| No. | 1 |
| Yes. Describe | \$0.00 |
| 54. Add the dollar value of all of your entries from Part 7. Write that number here> | \$0.00 |
| | |

Joaquin Case 17-21219 Desc Main

Entered 07/17/17 15:59:28 Page 16 of 60 umber (if known) Doc 1 Filed 07/17/17

Ruacho-Hernandez

Document Debtor 1 Middle Name

| Part 8: List the Totals of Each Part of this Form | | |
|---|--------------|--------------|
| 55. Part 1: Total real estate, line 2 | | \$ 0.00 |
| 56. Part 2: Total vehicles, line 5 | \$ 22,672.00 | |
| 57. Part 3: Total personal and household items, line 15 | \$ 2,510.00 | |
| 58. Part 4: Total financial assets, line 36 | \$ 9,005.00 | |
| 59. Part 5: Total business-related property, line 45 | \$ 0.00 | |
| 60. Part 6: Total farm- and fishing-related property, line 52 | \$ 0.00 | |
| 61. Part 7: Total other property not listed, line 54 | \$ 0.00 | |
| 62. Total personal property. Add lines 56 through 61 | \$ 34,187.00 | \$ 34,187.00 |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62 | | \$34,187.00 |

Page 7 of 7 Official Form 106A/B Record # 741123 Schedule A/B: Property

| Fill in this in | nformation to ider | | |
|---------------------|---------------------|--|---------------------|
| Debtor 1 | Joaquin | | Ruacho-Hernande: |
| | First Name | Middle Name | Last Name |
| Debtor 2 | Patricia | | Medrano |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court fo | or the : <u>NORTHERN</u> District of _ | ILLINOIS (State) |
| Case Number | r | | |
| (If known) | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identif | y the Property You Claim as Exempt | | | |
|-------------------------|--|--------------------------------------|---|------------------------------------|
| Which set of ex | emptions are you claiming? Check | cone only, even if your spo | ouse is filing with you. | |
| You are clair | ming state and federal nonbankrupt | cy exemptions . 11 U.S.C. | § 522(b)(3) | |
| You are clair | ming federal exemptions. 11 U.S.C. | § 522(b)(2) | | |
| | | | | |
| For any propert | y you list on Schedule A/B that yo | u claim as exempt, fill in t | the information below. | |
| • | on of the property and line on hat lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief description: | 2009 Nissan Versa with over 60,000 miles. | \$_1,572 | \$_2,400 | 735 ILCS 5/12-1001(c) - \$2,400.00 |
| Line from Schedule A/B: | 03 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | 2005 Mitsubishi Montero with over 120,000 miles. | \$_ 2,200 | \$_2,400 | 735 ILCS 5/12-1001(c) - \$2,400.00 |
| Line from Schedule A/B: | 03 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Furniture, linens, small appliances, table & chairs, bedroom set | \$_ 1,000 | <u></u> \$ | 735 ILCS 5/12-1001(b) - \$1,000.00 |
| Line from Schedule A/B: | 06 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Flat screen TV, Blu-ray palyer, tablet, printer, gaming system and games, cell phone | \$_1,000 | | 735 ILCS 5/12-1001(b) - \$1,000.00 |
| Line from Schedule A/B: | 07 | | 100% of fair market value, up to any applicable statutory limit | |
| | | | | |
| Official Form 106C | Record # 741123 | Schedule C: T | he Property You Claim as Exempt | Page 1 of 3 |

Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Document Page 18 of 60 Lase Number (if known)

Debtor 1 Joaquin

First Name Middle Name

| - | n of the property and line on nat lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|---------------------------|--|--------------------------------------|---|--------------------------------------|
| | | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief lescription: | Everyday clothes, shoes, accessories | \$_200 | \$ | 735 ILCS 5/12-1001(a),(e) - \$200.00 |
| ine from Schedule A/B: | <u>11</u> | | 100% of fair market value, up to any applicable statutory limit | |
| Brief escription: | Costume Jewelry | \$_ 100 | \$ | 735 ILCS 5/12-1001(a),(e) - \$100.00 |
| ine from Schedule A/B: | 12 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief escription: | Books, CDs, DVDs & Family Photos | \$_ 50 | \$ | 735 ILCS 5/12-1001(a) - \$50.00 |
| ine from Schedule A/B: | 14 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief escription: | Blood pressure monitor and glucose meter | \$ <u>160</u> | \$ | 735 ILCS 5/12-1001(b) - \$160.00 |
| ine from Schedule A/B: | 14 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief escription: | Savings Account, Chase Bank, 5.00 | \$_ 5 | \$ | 735 ILCS 5/12-1001(b) - \$5.00 |
| ine from Schedule A/B: | <u>17</u> | | 100% of fair market value, up to any applicable statutory limit | |
| rief escription: | Checking Account, Chase Bank, 800.00 | \$_ 800 | \$ | 735 ILCS 5/12-1001(b) - \$800.00 |
| ine from Schedule A/B: | <u>17</u> | | 100% of fair market value, up to any applicable statutory limit | |
| rief escription: | IRA, Fidelity, 8,000.00 | \$_ 8,000 | | 735 ILCS 5/12-1006 - \$0.00 |
| ine from Schedule A/B: | 21 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief lescription: | Potential workers' compensation claim | \$Unknown | \$ | 820 ILCS 305/21 - \$0.00 |
| ine from Schedule A/B: | 30 | | 100% of fair market value, up to any applicable statutory limit | |
| rief escription: | Expected class action settlement from JC Penny | \$ <u>200</u> | \$ | 735 ILCS 5/12-1001(b) - \$200.00 |
| ine from Schedule A/B: | 34 | | 100% of fair market value, up to any applicable statutory limit | |
| | | | | |
| | | | | |

Debtor 1 Joaquin Document Page 19 of 60 Case Number (if known)

Middle Name

Additional Page Part 2: Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption Schedule A/B 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? Yes. Record # 741123 Official Form 106C Schedule C: The Property You Claim as Exempt Page 3 of 3

| Case Number (If known) Official Form 10 Schedule D: Cree Le as complete and accuration formation. If more space dditional pages, write you have the specific or the specifi | ditors Who Have the as possible. If two mais needed, copy the Add or name and case number claims secured by your and submit this form to the information below. | re Claims Sec re Claims Sec arried people are filing ditional Page, fill it out er (if known). property? the court with your other than one secured claim particular claim, list the | g together, both are early, number the entries, er schedules. You have n, list the creditor sepale other creditors in Par | erty qually responsible for and attach it to this enothing else to report | form. On the top of a | Column A Value of collateral that supports this | |
|--|---|---|---|---|---|--|----------------------------|
| Debtor 2 (Spouse, if filing) United States Bankruptcy C Case Number (If known) Official Form 10 Schedule D: Cree e as complete and accuration formation. If more space diditional pages, write you 1. Do any creditors have No. Check this box Yes. Fill in all of the Part 1: List All Secured claim for each claim. If more As much as possible, Creditor's Name Po Box Box 542000 Number Street Omaha | Middle Nam Court for the :NORTHERN ACCOUNT OF THE NAME OF TH | District of ILLINOIS TE Claims Secarried people are filing ditional Page, fill it outer (if known). property? The court with your other than one secured claim particular claim, list the | Medranoast NameState) cured by Prop g together, both are eat, number the entries, er schedules. You have | qually responsible for and attach it to this and attach it to this e nothing else to repo | form. On the top of a ort on this form. Column A Amount of claim | amended fi | Column C Unsecured portion |
| United States Bankruptcy C Case Number (If known) Official Form 10 Schedule D: Cree e as complete and accurationmation. If more space dditional pages, write you 1. Do any creditors have No. Check this box Yes. Fill in all of the Part 1: List All Secured claim for each claim. If more As much as possible, Creditor's Name Po Box Box 542000 Number Street Omaha | ditors Who Have the aspossible. If two mais needed, copy the Add our name and case number claims secured by your and submit this form to the information below. red Claims s. If a creditor has more the than one creditor has a | District of ILLINOIS TE Claims Sec arried people are filing ditional Page, fill it out er (if known). property? the court with your other than one secured claim particular claim, list the | st Name State) State) State) Ground by Prop Grogether, both are et, number the entries, er schedules. You have | qually responsible for and attach it to this and attach it to this e nothing else to repo | form. On the top of a ort on this form. Column A Amount of claim | amended fi | Column C Unsecured portion |
| United States Bankruptcy C Case Number (If known) Official Form 10 Schedule D: Cree e as complete and accura formation. If more space dditional pages, write you 1. Do any creditors have No. Check this box Yes. Fill in all of the Port 1: List All Secured claim for each claim. If more As much as possible, Creditor's Name Po Box Box 542000 Number Street Omaha | ditors Who Have the aspossible. If two mais needed, copy the Add our name and case number claims secured by your and submit this form to the information below. red Claims s. If a creditor has more the than one creditor has a | District of ILLINOIS (a) (c) (d) (d) (e) (e) (e) (e) (e) (e | State) Cured by Prop g together, both are et, number the entries, er schedules. You have | qually responsible for and attach it to this and attach it to this e nothing else to repo | form. On the top of a ort on this form. Column A Amount of claim | amended fi | Column C Unsecured portion |
| Case Number (If known) Official Form 10 Schedule D: Cree e as complete and accura formation. If more space dditional pages, write you 1. Do any creditors have No. Check this box Yes. Fill in all of the Part 1: List All Secur 2. List all secured claim for each claim. If more As much as possible, Creditor's Name Po Box Box 542000 Number Street Omaha | ditors Who Have the as possible. If two mains are and case number claims secured by your and submit this form to the information below. red Claims s. If a creditor has more the than one creditor has a | re Claims Sec arried people are filing ditional Page, fill it out er (if known). property? the court with your other than one secured claim particular claim, list the | g together, both are et, number the entries, er schedules. You have | qually responsible for and attach it to this and attach it to this e nothing else to repo | form. On the top of a ort on this form. Column A Amount of claim | amended fi | Column C Unsecured portion |
| Official Form 10 Schedule D: Cree e as complete and accuration of the complete and complete | ate as possible. If two mais needed, copy the Add or name and case number claims secured by your and submit this form to the information below. The Claims Solidate that a creditor has more the than one creditor has a property of the control of | re Claims Sec arried people are filing ditional Page, fill it out er (if known). property? the court with your other than one secured claim particular claim, list the | g together, both are et, number the entries, er schedules. You have | qually responsible for and attach it to this and attach it to this e nothing else to repo | form. On the top of a ort on this form. Column A Amount of claim | amended fi | Column C Unsecured portion |
| Official Form 10 Schedule D: Cree e as complete and accuration of the complete and complete | ate as possible. If two mais needed, copy the Add or name and case number claims secured by your and submit this form to the information below. The Claims Solidate that a creditor has more the than one creditor has a property of the control of | arried people are filing litional Page, fill it out or (if known). property? the court with your other than one secured claim particular claim, list the | g together, both are early, number the entries, er schedules. You have n, list the creditor sepale other creditors in Par | qually responsible for and attach it to this and attach it to this e nothing else to repo | form. On the top of a ort on this form. Column A Amount of claim | amended fi | Column C Unsecured portion |
| e as complete and accurationmation. If more space dditional pages, write you are not complete. It is all secured claim. If more As much as possible, Part 1: List All Secured claim. If more As much as possible, Creditor's Name Po Box Box 542000 Number Street Omaha | ate as possible. If two mais needed, copy the Add or name and case number claims secured by your and submit this form to the information below. The Claims Solidate that a creditor has more the than one creditor has a property of the control of | arried people are filing litional Page, fill it out or (if known). property? the court with your other than one secured claim particular claim, list the | g together, both are early, number the entries, er schedules. You have n, list the creditor sepale other creditors in Par | qually responsible for and attach it to this and attach it to this e nothing else to repo | form. On the top of a ort on this form. Column A Amount of claim | Column A Value of collateral that supports this | Column C Unsecured portion |
| le as complete and accuration formation. If more space dditional pages, write you 1. Do any creditors have No. Check this box Yes. Fill in all of the Part 1: List All Secured claim for each claim. If more As much as possible, PORD CRED Creditor's Name Po Box Box 542000 Number Street Omaha | ate as possible. If two mais needed, copy the Add ir name and case numbe claims secured by your and submit this form to the information below. red Claims s. If a creditor has more the than one creditor has a | arried people are filing litional Page, fill it out or (if known). property? the court with your other than one secured claim particular claim, list the | g together, both are early, number the entries, er schedules. You have n, list the creditor sepale other creditors in Par | qually responsible for and attach it to this and attach it to this e nothing else to repo | form. On the top of a ort on this form. Column A Amount of claim | Column A Value of collateral that supports this | Column C Unsecured portion |
| e as complete and accuration accuration. If more space diditional pages, write you on the space of the space | ate as possible. If two mais needed, copy the Add ir name and case numbe claims secured by your and submit this form to the information below. red Claims s. If a creditor has more the than one creditor has a | arried people are filing litional Page, fill it out or (if known). property? the court with your other than one secured claim particular claim, list the | g together, both are early, number the entries, er schedules. You have n, list the creditor sepale other creditors in Par | qually responsible for and attach it to this and attach it to this e nothing else to repo | form. On the top of a ort on this form. Column A Amount of claim | Column A Value of collateral that supports this | Unsecured portion |
| 2. List all secured claim for each claim. If more As much as possible, 2.1 FORD CRED Creditor's Name Po Box Box 542000 Number Street Omaha | s. If a creditor has more the than one creditor has a | particular claim, list the | e other creditors in Par | - | Amount of claim | Value of collateral that supports this | Unsecured portion |
| for each claim. If more As much as possible, 2.1 FORD CRED Creditor's Name Po Box Box 542000 Number Street Omaha | e than one creditor has a | particular claim, list the | e other creditors in Par | - | Amount of claim | Value of collateral that supports this | Unsecured portion |
| Creditor's Name Po Box Box 542000 Number Street Omaha | | Describe the pro | perty that secures the | | value of collateral \$ 32,462.00 | claim \$ 20,000.00 | \$ 12,462.00 |
| Po Box Box 542000 Number Street Omaha | | | with over 7,000 miles | | | | - |
| Omaha |) | | | | | | |
| | | | | | | | |
| | | As of the date yo | ou file, the claim is: Che | ck all that apply. | | | |
| | NE 00454 | Contingent | | | | | |
| City | NE 68154 | Unliquidated | | | | | |
| | State Zip Code | Disputed | | | | | |
| Who owes the debt? | heck one. | Nature of Lien. | Check all that apply. | | | | |
| Debtor 1 only | | An agreement | you made (such as mortg | age or secured | | | |
| Debtor 2 only | | car loan) | | | | | |
| Debtor 1 and Debtor | 2 only | Statutory lien (s | such as tax lien, mechani | s's lien) | | | |
| At least one of the de | btors and another | Judgment lien | from a lawsuit | | | | |
| Check if this claim | relates to a | Other (including | g a right to offset) | | | | |
| community debt | 2016-01-16 | Last 4 digits of a | ccount number | 833 | | | |
| Date Debt was incurre | u | | | | | | |
| Part 2: List Others t | o Be Notified for a Debt Th | ilat Tou Alleady Listed | | | | | |
| Use this page only if you ha trying to collect from you fo than one creditor for any of debts in Part 1, do not fill o | or a debt you owe to some the debts that you listed i | one else, list the credit | or in Part 1, and then li | st the collection agen | cy here. Similarly, if yo | ou have more | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$_32,462.00

| | | Caco 17 21210 D | oc 1 Filod 07/17/17 I | Entered 07/17/17 15:59:28 | Desc Main |
|---------------------------|---|---|---|---|---------------------------------|
| Fill | in this | information to identify your case: | | 1 of 60 | Desc Main |
| | | Joaquin | Ruacho-Hernan | ndez | |
| Del | otor 1 | First Name Middle Nan | | uez | |
| D-1 | -40 | Patricia | Medrano | | |
| | otor 2 use, if filing | | | | |
| (| ,9 | ,, | | | |
| Uni | ted State | es Bankruptcy Court for the : <u>NORTHERN</u> | District of _ <u>ILLINOIS</u> | | |
| Cas | se Numb | ber | (Giate) | | Check if this is an |
| (If k | (nown) | | | | amended filing |
| Offic | cial I | Form 106E/F | | | |
| Sch | odul | e E/F: Creditors Who Ha | ave Unsecured Claims | | 12/15 |
| | | | | and Part 2 for creditors with NONPRIORITY c | laims |
| /B: Pi redito eedeo | roperty ors with d, copy any add | (Official Form 106A/B) and on Schedn partially secured claims that are listed | ule G: Executory Contracts and Unexpet in Schedule D: Creditors Who Have the entries in the boxes on the left. Attaase number (if known). | claim. Also list executory contracts on <i>Sched</i> oired Leases (Official Form 106G). Do not inc Claims Secured by Property. If more space is ach the Continuation Page to this page. On the | lude any s |
| | | reditors have priority unsecured clain | | | |
| | | Go to Part 2. | | | |
| F | ; | 00 10 1 411 2. | | | |
| | | f your priority unsecured claims. If a c | reditor has more than one priority unsec | cured claim, list the creditor separately for each | claim For |
| | | • • • | · · · | ity amounts, list that claim here and show both | |
| nc | npriorit | ty amounts. As much as possible, list th | e claims in alphabetical order according | to the creditor's name. If you have more than t | wo priority |
| | | - | | s a particular claim, list the other creditors in Pa | art 3. |
| (F | or an e | explanation of each type of claim, see th | e instructions for this form in the instructi | Total claim | Priority Nonpriority |
| | | | | | amount amount |
| Par | t 2: | List All of Your NONPRIORITY Unsecu | red Claims | | |
| 3. D c | any c | reditors have nonpriority unsecured c | claims against you? | | |
| Г | l No N | You have nothing to report in this part | Submit this form to the court with your ot | ther schedules | |
| | í | rod have hearing to report in the part. | Cashin and form to allo sourt war your or | and deficulties. | |
| 4 Lie | Yes. | f your poppriority upsocured claims in | the alphabetical order of the creditor | who holds each claim. If a creditor has more t | than one |
| | | | • | ted, identify what type of claim it is. Do not list of | |
| ind | cluded | in Part 1. If more than one creditor hold | s a particular claim, list the other creditor | rs in Part 3.If you have more than three nonprio | ority unsecured |
| cla | aims fill | I out the Continuation Page of Part 2. | | | T. 4.1.1.1 |
| 4.1 | CAP1 | 1/Mnrds | Last 4 digits of account number | NULL | Total claim \$ 502.00 |
| 4.1 | Creditor | r's Name | | | · |
| | 26525 | 5 N Riverwoods Blvd | When was the debt incurred? | 2015-2017 | |
| | Numbe | er Street | | | |
| | | | As of the date you file, the claim is: | Check all that apply. | |
| | Metta | ıwa IL 60045 | Contingent | | |
| | City | State Zip Code | Unliquidated Disputed | | |
| ٧ | | ves the debt? Check one. | Disputed | | |
| | = | or 1 only | T (NONDRIODITY | alata. | |
| L T | = | or 2 only or 1 and Debtor 2 only | Type of NONPRIORITY unsecured of Student loans | alini: | |
| ř | = | ast one of the debtors and another | Obligations arising out of a separati | ion agreement or divorce | |
| Ī | = | ck if this claim relates to a | that you did not report as priority cla | | |
| - | com | munity debt | Debts to pension or profit-sharing pl | lans, and other similar debts | |
| į: | | aim subject to offest? | • | One diá lue e | |
| Ī | No Yes | | Other. Specify Credit Card or 0 | Gredit Use | |
| | | | | | |

Document Page 22 of 60 Case Number (if known) Joaquin Debtor 1

| After li | isting any entries on this page, number them b | eginning with 4.4, followed by 4.5, and so forth. | Total Claim |
|----------|--|--|--------------------|
| 4.2 | Capital One | Last 4 digits of account number 7112 | \$ <u>1,200.00</u> |
| | Creditor's Name | <u> </u> | |
| | PO Box 5294 | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Carol Stream IL 60197 | Unliquidated | |
| ١, | City State Zip Code Who owes the debt? Check one. | Disputed | |
| l i | Debtor 1 only | | |
| l i | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| l i | Debtor 1 and Debtor 2 only | Student loans | |
| l i | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| l i | Check if this claim relates to a | that you did not report as priority claims | |
| ' | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| ! | s the claim subject to offest? | | |
| | No | Other. Specify Credit Card or Credit Use | |
| | Yes | | |
| 4.3 | Capital One | Last 4 digits of account number 7112 | \$ <u>2,000.00</u> |
| | Creditor's Name PO Box 30285 | When was the debt incurred? | |
| | Number Street | when was the dept incurred: | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Salt Lake City UT 84130 | Contingent | |
| | City State Zip Code | Unliquidated | |
| ' | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| Ι. | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| l i | s the claim subject to offest? | 0.0171.0001.000.071111.0 | |
| | Yes | Other. Specify Credit Card or Credit Use | |
| 4.4 | Capitalone | Last 4 digits of account number NULL | \$ 2,216.00 |
| 4.4 | Creditor's Name | | · |
| | 15000 Capital One Dr | When was the debt incurred? 2015-2017 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Richmond VA 23238 | Unliquidated | |
| ١, | City State Zip Code Who owes the debt? Check one. | Disputed | |
| `i | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| 1 | s the claim subject to offest? | - Provide the prov | |
| | No | Other. Specify Credit Card or Credit Use | |
| | Yes | - | |

Document Page 23 of 60 Case Number (if known) Joaquin Debtor 1

| Par | Your NONPRIORITY Unsecured Claims - 0 | Continuation Page | | |
|----------|--|--|----------------------------|--------------------|
| After li | sting any entries on this page, number them b | peginning with 4.4, followed by 4.5, and s | so forth. | Total Claim |
| 4.5 | Capitalone | Last 4 digits of account number | NULL | \$ 2,315.00 |
| | Creditor's Name | | 2014-2017 | |
| | 15000 Capital One Dr | When was the debt incurred? | 2014-2017 | |
| | Number Street | | | |
| | | As of the date you file, the claim is: Ch | neck all that apply. | |
| | Disharand VA 02020 | Contingent | | |
| | Richmond VA 23238 | Unliquidated | | |
| \ | City State Zip Code Who owes the debt? Check one. | Disputed | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured clair | m: | |
| ļļ | Debtor 1 and Debtor 2 only | Student loans | | |
| | At least one of the debtors and another | Obligations arising out of a separation a | | |
| L | Check if this claim relates to a | that you did not report as priority claims | | |
| Ι., | community debt s the claim subject to offest? | Debts to pension or profit-sharing plans | s, and other similar debts | |
| i | No | Cradit Card or Cra | dit I laa | |
| l i | Yes | Other. Specify Credit Card or Cre | uit Ose | |
| 4.6 | CBNA | Last 4 digits of account number | NULL | \$ _182.00 |
| | Creditor's Name | | | |
| | Po Box 6189 | When was the debt incurred? | 2016-2017 | |
| | Number Street | | | |
| | | As of the date you file, the claim is: Ch | neck all that apply. | |
| | | Contingent | | |
| | Sioux Falls SD 57117 | Unliquidated | | |
| Ι, | City State Zip Code Who owes the debt? Check one. | Disputed | | |
| l i | Debtor 1 only | . | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured clair | | |
| | Debtor 1 and Debtor 2 only | Student loans | III. | |
| | At least one of the debtors and another | Obligations arising out of a separation a | pareement or divorce | |
| | = | that you did not report as priority claims | | |
| 1 | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans | | |
| 1 | s the claim subject to offest? | | , and other offinial debte | |
| | No | Other. Specify Credit Card or Cre | dit Use | |
| | Yes | | | |
| 4.7 | CBNA | Last 4 digits of account number | NULL | \$ 534.00 |
| | Creditor's Name | | 2015-2017 | |
| | Po Box 6497 | When was the debt incurred? | 2013-2017 | |
| | Number Street | | | |
| | | As of the date you file, the claim is: Ch | neck all that apply. | |
| | Siany Falla SD 57447 | Contingent | | |
| | Sioux Falls SD 57117 | Unliquidated | | |
| ١ ، | City State Zip Code Who owes the debt? Check one. | Disputed | | |
| | Debtor 1 only | | | |
| l i | Debtor 2 only | Type of NONPRIORITY unsecured clair | m: | |
| i | Debtor 1 and Debtor 2 only | Student loans | | |
| | At least one of the debtors and another | Obligations arising out of a separation a | agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | | |
| 1 | community debt | Debts to pension or profit-sharing plans | | |
| <u>!</u> | s the claim subject to offest? | | | |
| | No | Other. Specify Credit Card or Cre | dit Use | |
| | Yes | | | |

Document Page 24 of 60 Case Number (if known) Joaquin Debtor 1

| After li | isting any entries on this page, number them be | eginning with 4.4, followed by 4.5, and so forth. | Total Claim |
|--------------|---|---|---------------------|
| 4.8 | Chicago Finance Center | Last 4 digits of account number | \$ 15,114.00 |
| | Creditor's Name 4024 W. Montrose Ave Number Street | When was the debt incurred? | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Chicago IL 60654 | | |
| | City State Zip Code | Unliquidated | |
| V | Who owes the debt? Check one. Debtor 1 only | Disputed | |
| l i | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| 1 | Debtor 1 and Debtor 2 only | Student loans | |
| | = | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | |
| [| Check if this claim relates to a community debt | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | s the claim subject to offest? | Debts to pension or profit-snaring plans, and other similar debts | |
| | No | Other. SpecifyDeficiency, Repo'd/Surr'd Auto | |
| | Yes | - NULL | 0.1.1.00 |
| 4.9 | CITI | Last 4 digits of account number NULL | \$ <u>814.00</u> |
| | Creditor's Name | When was the debt incurred? 2015-2017 | |
| | Po Box 6241 | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Sioux Falls SD 57117 | Unliquidated | |
| v | City State Zip Code Who owes the debt? Check one. | Disputed | |
| li | Debtor 1 only | | |
| | = | T. CHOURDONIEV | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| [| Check if this claim relates to a | that you did not report as priority claims | |
| | community debt s the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| ľ | No | 0 - 11 0 - 1 - 0 0 - 11 1 1 - | |
| | = | Other. SpecifyCredit Card or Credit Use | |
| 4.40 | Yes Discover FIN SVCS LLC | Last 4 digits of account number NULL | \$ 2,792.00 |
| 4.10 | Creditor's Name | Lust 4 digits of account number | |
| | Po Box 15316 | When was the debt incurred? 2015-2017 | |
| | Number Street | | |
| | | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Wilmington DE 19850 | Contingent | |
| | City State Zip Code | Unliquidated | |
| V | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| [| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| [| Debtor 1 and Debtor 2 only | Student loans | |
| أ | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| } | Check if this claim relates to a | that you did not report as priority claims | |
| " | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| į į | s the claim subject to offest? | <u> </u> | |
| | No | Other. Specify Credit Card or Credit Use | |
| | Yes | | |

Document Page 25 of 60 Case Number (if known) Joaquin Debtor 1

| After li | sting any entries on this page, number them be | ginning with 4.4, followed by 4.5, and so forth. | Total Claim |
|-----------|--|---|-----------------|
| 4.11 | Dish Network | Last 4 digits of account number | \$ 86.00 |
| | Creditor's Name | | |
| | Dept. 0063 | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Palatine IL 60055-0063 | Unliquidated | |
| ١., | City State Zip Code | Disputed | |
| l v | Vho owes the debt? Check one. | | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | ☐ Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| [| Check if this claim relates to a | that you did not report as priority claims | |
| | community debt s the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| ľ | No | Out of the Hills/Collular Service | |
| | Yes | Other. Specify Utility Bills/Cellular Service | |
| 4.12 | Equifax | Last 4 digits of account number | \$ 0.00 |
| 7.12 | Creditor's Name | | |
| | PO Box 740241 | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Atlanta GA 30374 | Unliquidated | |
| | City State Zip Code | Disputed | |
| \ \ \ \ \ | Vho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | ☐ Student loans | |
| [| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| Ι. | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| " | s the claim subject to offest? | | |
| | No T., | Other. Specify Notice Only | |
| 4.40 | Yes Experian | Last 4 digits of account number | \$ 0.00 |
| 4.13 | Creditor's Name | Last 4 digits of account number | <u> </u> |
| | PO Box 2002 | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file the claim in. Check all that comb | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Allen TX 75013 | Contingent | |
| | City State Zip Code | Unliquidated | |
| <u> </u> | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| [| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| [| Debtor 1 and Debtor 2 only | Student loans | |
| [| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| [| Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | s the claim subject to offest? | _ | |
| | No | Other. Specify Notice Only | |
| | Yes | | |

Document Page 26 of 60 Case Number (if known) Joaquin Debtor 1

| After I | isting any entries on this page, number them be | eginning with 4.4, followed by 4.5, and so forth. | Total Claim |
|---------|---|---|---------------------|
| 4.14 | Mcydsnb | Last 4 digits of account number NULL | \$ 594.00 |
| | Creditor's Name | When was the debt incurred? 2015-2017 | |
| | Po Box 8218 | When was the debt incurred? 2015-2017 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Mason OH 45040 | Contingent | |
| | City State Zip Code | Unliquidated | |
| , | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt Is the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| | No | Other. Specify | |
| | Yes | Other. Specify Oreal of Great Ose | |
| 4.15 | Merchants Credit Guide | Last 4 digits of account number 2003 | \$ 195.00 |
| | Creditor's Name | When was the debt incurred? 2016-2016 | |
| | 223 W Jackson Blvd Ste 7 | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Chicago IL 60606 | Contingent | |
| | City State Zip Code | Unliquidated | |
| , | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offest? | M. F. (D.) | |
| | Yes | Other. Specify Medical Debt | |
| 4.16 | Merchants Credit Guide | Last 4 digits of account number5402 | \$ _1,039.00 |
| 1.10 | Creditor's Name | | |
| | 223 W Jackson Blvd Ste 7 | When was the debt incurred? 2012-2012 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Chicago IL 60606 | Unliquidated | |
| , | City State Zip Code Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offest? | | |
| | No No | Other. Specify Medical Debt | |
| | Yes | | |

Document Page 27 of 60 Case Number (if known) Joaquin Debtor 1

| After I | isting any entries on this page, number them be | eginning with 4.4, followed by 4.5, and so forth. | Total Claim |
|---------|--|---|------------------|
| | L Court of DVD Court FIN | | . 000 00 |
| 4.17 | Oportun IN/Profreso FIN | Last 4 digits of account number | \$ <u>809.00</u> |
| | Creditor's Name 171 Constitution Dr. | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date was file the plains in Observation | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Menlo Park CA 94025 | Contingent | |
| | City State Zip Code | Unliquidated | |
| ' | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a community debt | that you did not report as priority claims | |
| ١, | Is the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| | No | Other. Specify Debt Owed | |
| | Yes | Other. Specify | |
| 4.18 | Sears/CBNA | Last 4 digits of account number | <u>\$ 270.00</u> |
| | Creditor's Name | | |
| | PO Box 6282 | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Sioux Falls SD 57117 | Contingent | |
| | City State Zip Code | Unliquidated | |
| ١ ١ | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offest? | | |
| | No No | Other. Specify Debt Owed | |
| 4.19 | Yes Syncb/OLD NAVY | Last 4 digits of account number NULL | \$ 59.00 |
| 4.15 | Creditor's Name | | • |
| | Po Box 965005 | When was the debt incurred? 2015-2017 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Orlando FL 32896 | Unliquidated | |
| Ι, | City State Zip Code Who owes the debt? Check one. | Disputed | |
| i | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| ' | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| ! | ls the claim subject to offest? | | |
| | No | Other. Specify Credit Card or Credit Use | |
| | Yes | - | |

Document Page 28 of 60 Case Number (if known) Joaquin Debtor 1

| Par | Your NONPRIORITY Unsecured Claims - C | Continuation Page | |
|---------------------------------------|--|---|--------------------|
| After li | sting any entries on this page, number them b | peginning with 4.4, followed by 4.5, and so forth. | Total Claim |
| 4.20 | Syncb/Walmart | Last 4 digits of account number NULL | \$ <u>344.00</u> |
| | Creditor's Name | When was the debt incurred? 2015-2017 | |
| | Po Box 965024 | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | C. | Contingent | |
| | Orlando FL 32896 | Unliquidated | |
| \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | City State Zip Code Vho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| ļ | Debtor 1 and Debtor 2 only | ☐ Student loans | |
| <u> </u> | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| L | Check if this claim relates to a | that you did not report as priority claims | |
| ١, | community debt s the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| l i | No | Other. Specify Credit Card or Credit Use | |
| li | Yes | Other, specify | |
| 4.21 | SYNVB/JC Penney | Last 4 digits of account number | \$ 3,025.00 |
| | Creditor's Name | | |
| | PO Box 965007 | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Orlando FL 32896 | Unliquidated | |
| ١, | City State Zip Code Who owes the debt? Check one. | Disputed | |
| li | Debtor 1 only | | |
| l i | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| l i | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | = | that you did not report as priority claims | |
| " | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| <u> </u> | s the claim subject to offest? | | |
| | No | Other. Specify Debt Owed | |
| | Yes | | |
| 4.22 | Transunion | Last 4 digits of account number | \$ <u>0.00</u> |
| | Creditor's Name | When we the debt incomed? | |
| | PO Box 1000 | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Chester PA 19022 | Contingent | |
| | City State Zip Code | Unliquidated | |
| v | Vho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| [| Debtor 1 and Debtor 2 only | Student loans | |
| أ | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| أ | Check if this claim relates to a | that you did not report as priority claims | |
| ' | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| ! | s the claim subject to offest? | | |
| | No | Other. Specify Notice Only | |
| | Yes | | |

Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Case 17-21219

Document Page 29 of 60 Case Number (if known) Joaquin Debtor 1

VA 23502

State Zip Code

List Others to Be Notified for a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Enhanced Recovery Co On which entry in Part 1 or Part 2 list the original creditor? Name PO Box 57547 Line __8 __ of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Number FL 32241 Jacksonville Last 4 digits of account number _____ State Zip Code City Portfolio Recovery Assoc. On which entry in Part 1 or Part 2 list the original creditor? Name 120 Corporate Blvd., Ste. 100 Line __18__ of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Number Street

Last 4 digits of account number _____

Norfolk

City

Debtor 1 Joaquin

Joaquiii

Last

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | Total claim |
|-----------------------------|--|------------|---------------------|
| Total claims from Part 1 | 6a. Domestic support obligations | 6a. | \$0.00 |
| | 6b. Taxes and Certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 |
| | | | |
| | | | Total claim |
| Total claims from Part 2 | 6f. Student loans | 6f. | Total claim \$0.00 |
| | 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6f. 6g. | 0.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority | | \$0.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other | 6g. | \$ |

| Fill | in this in | Caso 1 | | oc 1 E | ilad 07/17/17 | Entor | | 7/17 15:59 | 9:28 I | Desc Ma | in | |
|---------------------------|---|---|---|--|--|----------------------------|-----------------|------------------|----------------|---------|-------------------------------|-------|
| ГШ | III UIIS III | iormation to lue | nully your case. | | | | 1 of 60 | | | | | |
| De | btor 1 | Joaquin | | | Ruacho-Hern | andez | | | | | | |
| | | First Name | Middle Name | | Last Name | | | | | | | |
| | btor 2 buse, if filing) | Patricia First Name | Middle Name | | Medrano Last Name | | | | | | | |
| | | | | | | | | | | | | |
| Un | ited States | Bankruptcy Court f | or the : <u>NORTHERN</u> | _ District of _ <u>IL</u> | <u>LINOIS</u> (State) | | | | | | | |
| | se Number known) | | | | | | | | | _ | k if this is ar ded filing | 1 |
| Offi | cial F | orm 106G | ì | | | | | | | | | |
| | | | | te and I | Jnexpired Lea | 606 | | | | | | 12/15 |
| Be as nform additio | complete lation. If n onal page: o you hav | and accurate as nore space is ne s, write your nan e any executory | possible. If two mar eded, copy the addit ne and case number contracts or unexpi | ried people a ional page, f (if known). red leases? | are filing together, bot ill it out, number the en your other schedules. You | n are equal ntries, and | attach it to th | is page. On the | e top of any | | | |
| | - | | | | | | | | | | | |
| | ■ Yes. Fil | I in all of the info | mation below even if | the contracts | or leases are listed in | Schedule A | A/B: Property (| Official Form 10 | 06A/B) | | | |
| ex | | nt, vehicle lease | | | e the contract or lease for this form in the inst | | | | | | | |
| F | Person or | company with v | hom you have the c | ontract or lea | ase | | State w | hat the contrac | ct or lease is | s for | | |
| 2.1 | Felipe F | Roman | | | | _ | | | | | | |
| | Name | Kimball Boor | | | | | | | | | | |
| | Number | Kimball Rear Street | | | | - | | | | | | |
| | Chicago |) | | IL 6064 | 7 | | | | | | | |
| | City | | | State Zip C | | _ | | | | | | |
| 2.2 | | | | | | _ | | | | | | |
| | Name | | | | | | | | | | | |
| | Number | Street | | | | _ | | | | | | |
| | City | | | State Zip Co | ode | - | | | | | | |
| 2.3 | | | | | | | | | | | | |
| | Name | | | | | - | | | | | | |
| | Number | Street | | | | - | | | | | | |
| | City | | | State Zip Co | ode | - | | | | | | |
| 2.4 | | | | | | | | | | | | |
| | Name | | | | | - | | | | | | |
| | Number | Street | | | | - | | | | | | |
| | City | | | State Zip Co | ode | - | | | | | | |
| 2.5 | | | | | | | | | | | | |
| | Name | | | | | - | | | | | | |
| | Number | Street | | | | - | | | | | | |

State Zip Code

City

Official Form 106G

| Fill in this in | nformation to iden | | |
|---------------------|---------------------|---------------------------------------|------------------|
| Debtor 1 | Joaquin | | Ruacho-Hernande: |
| | First Name | Middle Name | Last Name |
| Debtor 2 | Patricia | | Medrano |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court fo | r the : <u>NORTHERN</u> District of _ | ILLINOIS |
| | | | (State) |
| Case Number | r | | _ |
| (If known) | | | |

Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any A | dditional Page | es, write your name and case n | umber (if Known). Answer e | very questioi | 1. |
|-------------|----------------|--|----------------------------------|---------------|--|
| 1. D | o you have ar | y codebtors? (If you are filing a | joint case, do not list either s | spouse as a c | odebtor.) |
| | No. | | | | |
| | | B years, have you lived in a cor nia, Idaho, Lousiiana, Nevada, N | • • • • | | nmunity property states and territories include on, and Wisconsin.) |
| | No. Go to li | ne 3. | | | |
| | Yes. Did yo | ur spouse, former spouse, or le | gal equivalent live with you at | t the time? | |
| | _ | nwhich community state or territo | ory did you live? | F | ill in the name and current address of that person. |
| | Name of y | rour spouse, former spouse or legal equiva | alent | | |
| | Number | Street | | | |
| | City | | State | Zip Code | |
| | Column 1: Yo | or Schedule G to fill out Columi | n 2. | | Column 2: The creditor to whom you owe the debt Check all schedules that apply: |
| 3.1 | | | | | Schedule D, line |
| | Name | | | | Schedule E/F, line |
| | Number | Street | | | Schedule G, line |
| | City | | State | Zip Code | |
| 3.2 | | | | | Schedule D, line |
| | Name | | | | Schedule E/F, line |
| | Number | Street | | | Schedule G, line |
| | City | | State | Zip Code | |
| 3.3 | | | | | Schedule D, line |
| | Name | | | | Schedule E/F, line |
| | Number | Street | | | Schedule G, line |
| | City | | State | Zip Code | |

Official Form 106H Record # 741123 Schedule H: Your Codebtors Page 1 of 1

Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Document Page 33 of 60

| Fill in this in | nformation to identify | your case: | | |
|---------------------------|------------------------|------------------------------|------------------|-------------------|
| Debtor 1 | Joaquin | | Ruacho-Hernandez | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Patricia | | Medrano | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Case Number | . , | : <u>NORTHERN DISTRICT C</u> | OF ILLINOIS. | Check if this is: |
| (If known) | | | | An amended f |
| | | | | A supplement |

| Che | ck if this is: |
|-----|---|
| | An amended filing |
| | A supplement showing post-petition |
| | chapter 13 income as of the following date: |
| | |
| | MM / DD / YYYY |

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | Describe Employment | | | | | | |
|---|--|--------------------------|---------------------------|--------------------------------|-------------------------------------|--|--|
| 1. | Fill in your employment information | | | | Debtor 2 or non-filing spouse | | |
| | If you have more than one job, attach a separate page with information about additional employers. | Employment status | X Employed Not employed | | X Employed Not employed | | |
| | Include part-time, seasonal, or self-employed work. | Occupation | Maintenance | | Cleaning | | |
| | Occupation may Include student or homemaker, if it applies. | Employers name | J&J Equities | | J&J Equities | | |
| | | Employers address | 1218 W. Wilson | | 1218 W. Wilson Chicago, IL 60640 | | |
| | | | Chicago, IL 60640 | | | | |
| | | How long employed there? | Since 3/1/2013 | | Since 11/1/2016 | | |
| Pa | Give Details About Month Estimate monthly income as of the spouse unless you are separated. | - | nave nothing to report fo | r any line, write \$0 in the s | pace. Include your non-filing | | |
| If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. | | | | | | | |
| | | | | For Debtor 1 | For Debtor 2 or non-filing spouse | | |
| 2. | List monthly gross wages, salar deductions). If not paid monthly, or | • | \$2,912.00 | \$866.67 | | | |
| 3. | Estimate and list monthly overtime pay. | | | \$0.00 | \$0.00 | | |
| 4. | Calculate gross income. Add line | e 2 + line 3. | | \$2,912.00 | \$866.67 | | |

Official Form 106I Record # 741123 Schedule I: Your Income Page 1 of 2

Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Document Page 34 of 60

Debtor 1 Joaquin Case Number (if known) _ First Name Middle Name For Debtor 1 For Debtor 2 or non-filing spouse \$2,912.00 \$866.67 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions \$525.52 5a \$113.38 5b. Mandatory contributions for retirement plans 5b. \$0.00 \$0.00 5c. \$0.00 \$0.00 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. \$0.00 \$0.00 \$0.00 \$0.00 5e. Insurance 5e 5f. Domestic support obligations \$0.00 5f. \$0.00 5g. Union dues 5g. \$0.00 \$0.00 5h. Other deductions. Specify: 5h \$0.00 \$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h. 6. \$525.52 \$113.38 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$2,386.48 \$753.28 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a \$0.00 \$0.00 Interest and dividends 8b. \$0.00 \$0.00 Family support payments that you, a non-filing spouse, or a 8c. 8c. \$ 0.00 \$ 0.00 dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 \$0.00 **Social Security** 8e 8e. \$0.00 \$0.00 8f. Other government assistance that you regularly receive 8f. \$0.00 \$0.00 Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income 8g. \$0.00 \$0.00 Other monthly income. Specify: _ Pastor, 8h. \$500.00 \$0.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. \$500.00 \$0.00 Calculate monthly income. Add line 7 + line 9. 10. 10 \$2,886.48 \$753.28 \$3.639.76 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. \$0.00 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. \$3,639.76 Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Do you expect an increase or decrease within the year after you file this form? x No.

Yes. Explain:

| Description | Fill in this in | formation to identify yo | our case: | | | | |
|--|------------------|--|------------------------------|--------------------------------------|-------------------------------|---------------------|---------------------|
| Description Particle Partic | Debtor 1 | Joaquin | | Ruacho-Hernandez | Check if this is: | | |
| Income as of the following date: Income as a separate household: Income as a separate household: Income as a separate household: Income as a supplement in a chapter of the formation income as of the following date: Income as a supplement in a chapter of the formation income as of the following date: Income as a supplement in a chapter of the formation income as of the following date: Income as a supplement in a chapter of the formation income as of the following date: Income as a supplement in a chapter of the formation income as of the following date: Income as a supplement in a chapter of the formation income as of the following date: Income as a supplement in a chapter of the formation income as of the following date: Income as a supplement in a chapter of the formation income as of the following date: Income as a supplement in a chapter of the formation income as a supplement in a ch | | First Name | Middle Name | Last Name | An amende | ed filing | |
| United States Berinspey Court for the:MOSTILEBR DISTRICT OF ALL MORE. Care Nutritive | l | | Middle Name | | | | |
| A separate filing for Debtor 2 because Debtor 2 Official Form 106J Schedule J: Your Expenses 12/14 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer very quastion. 11. Is this a joint case? No. Qo to line 2. X Yes. Describe Your Household? No. Qo to line 2. X Yes. Describe 12 must file a separate Schedule J. Do not late Debtor 1 and Debtor 2 must file a separate Schedule J. Do not late Debtor 1 and Debtor 2 must file a separate Schedule J. Do not late Debtor 1 and Debtor 2 must file a separate Schedule J. Grandson 13 X Yes. | | | | | income as o | of the following d | ate: |
| A separate filling for Debtor 2 because Debtor 2 maintains a separate household. Schedule J: Your Expenses 12/14 | | | | | MM / DD / Y | YYYY | |
| Schedule J: Your Expenses 12/14 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer ververy question. No. Solid line | | · ———————————————————————————————————— | | | A | filiaa faa Dabtaa | O harawaa Dahtan O |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Your Household | Official F | orm 106J | | | | - | |
| Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Year Household 1. Is this a joint case? No. Go to line 2. Yes. Deable of zilve in a separate busehold? X No. Yes. Deable zilve in a separate busehold? X No. Yes. Deable zilve in a separate busehold? X No. Yes. Deable zilve in a separate Schedule J. Do not list Debter 1 and Deable zilve in a separate Schedule J. Do not state the dependents' names. Granddaughter 9 | | | penses | | | | 12/14 |
| Part 1: Describe Your Household 1. Is this a joint case? No. Os to line 2. Yes. Dobtor 2 must file a separate household? Yes. Dobtor 2 must file a separate Schedule J. 2. Do you have dependents? Do not list Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2. Do not state the dependents' names. Granddaughter Granddaughter Granddaughter Granddaughter Granddaughter 7 No. Granddaughter 9 No. Granddaughter 9 No. Yes. Fill out this information for each dependents' names. Granddaughter 9 No. Granddaughter 7 No. Yes. Fill out this information for each dependents' names. Granddaughter 9 No. Granddaughter 9 No. Yes. Yes. No. Granddaughter 7 No. Yes. Yes. Yes. A No. Yes. Part 2: Estimate Your ongoing Menthly Expanses Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filled. It his is a supplemental Schedule J. check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. Real estate taxes 4a. \$233.35 4b. Property, homeowner's, or renter's insurance | | | - | le are filing together, both are equ | ally responsible for supplyi | ng correct informa | ation. If |
| 1. Is this a joint case? No. Go to line 2. X Yes. Does Debtor 2 live in a separate household? X Yes. Does Debtor 2 live in a separate Schedule J. | - | | sheet to this form. On the | he top of any additional pages, wri | te your name and case num | nber (if known). Ar | swer |
| No. Go to line 2 Yes. Does Debtor 2 live in a separate household? Yes. Debtor 2 must file a separate Schedule J. | Part 1: | Describe Your Household | | | | | |
| X Yes. Does Debtor 2 live in a separate household? X No. | 1. Is this a joi | int case? | | | | | |
| No. Yes. Debtor 2 must file a separate Schedule J. | No. 0 | Go to line 2. | | | | | |
| 2. Do you have dependents? Do not list Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2. Do not state the dependents' names. Do not state the dependents' names. Son 21 No Grandson 13 X Yes Granddaughter 9 No Granddaughter 9 No Wes Pes No Granddaughter 9 No Wes No Granddaughter 7 No Wes | X Yes. | Does Debtor 2 live in a | separate household? | | | | |
| 2. Do you have dependents? Do not list Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2. Do not state the dependents' names. Do not state the dependents' names. Son 21 No X Yes Grandson 13 X Yes Granddaughter 9 No X Yes Granddaughter 7 No X Yes X No Ye | | X No. | | | | | |
| Do not list Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2. Do not state the dependents' names. Son 21 | | Yes. Debtor 2 mus | st file a separate Schedul | e J. | | | |
| Do not list Debtor 1 and Debtor 2. Do not state the dependents' names. Son 21 No | 2. Do you l | nave dependents? | No | 0 | ependent's relationship to | Dependent's | Does dependent live |
| Do not state the dependents' names. Grandson | | | | this information for - | ebtor 1 or Debtor 2 | age | - |
| Grandson 13 | Do not s | tate the dependents! | · | | Son | 21 | X Yes |
| Granddaughter Granddaughter Granddaughter Granddaughter T Yes No Yes No Yes Show And Any and Any and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance Fix yes No Tyes Tyes No Tyes Tyes No Tyes Tyes No Tyes Tyes Tyes Tyes Tyes Tyes Tyes Tyes No Tyes | | ate the dependents | | | | | No |
| Granddaughter Granddaughter Granddaughter 7 No yes No yes 3. Do your expenses include expenses of people other than yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106i.) Your expenses 4. \$806.00 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance | | | | (| Grandson | 13 | X Yes |
| Granddaughter 9 | | | | | | | |
| Granddaughter 7 No | | | | (| Granddaughter | 9 | l片 |
| 3. Do your expenses include expenses of people other than yourself and your dependents? Stimate Your Ongoing Monthly Expenses | | | | | | | |
| 3. Do your expenses include expenses of people other than yourself and your dependents? Fart 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$233.35 4b. Property, homeowner's, or renter's insurance | | | | (| Granddaughter | 7 | |
| 3. Do your expenses include expenses of people other than yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance | | | | _ | | | |
| 3. Do your expenses include expenses of people other than yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$138.00 | | | | | | | |
| expenses of people other than yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate Your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$806.00 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance | | | | | | | Yes |
| Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I</i> : Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance | | - | X No | | | | |
| Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I</i> : <i>Your Income</i> (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$138.00 | | | Yes | | | | |
| Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I</i> : <i>Your Income</i> (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$138.00 | Part 2: | Estimate Your Ongoing M | onthly Expenses | | | | |
| expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$806.00 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$138.00 | | | | ess you are using this form as a s | upplement in a Chapter 13 o | case to report | |
| Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$806.00 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$138.00 | | | uptcy is filed. If this is a | supplemental Schedule J, check t | he box at the top of the form | m and fill in | |
| of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$806.00 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$138.00 | | | ach government accieta | nce if you know the value | | | |
| any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4 \$806.00 4a. \$233.35 4b. \$138.00 | | = | = | | | Y | our expenses |
| any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4 \$806.00 4a. \$233.35 4b. \$138.00 | 4 The rent | tal or home ownership | evnenses for vour resid | anca Include first mortgage navme | nts and | _ | |
| If not included in line 4: 4a. Real estate taxes 4a. \$233.35 4b. Property, homeowner's, or renter's insurance 4b. \$138.00 | | | | | | 4. | \$806.00 |
| 4b. Property, homeowner's, or renter's insurance 4b. \$138.00 | | - | | | | | |
| | 4a. Re | eal estate taxes | | | | 4a. | \$233.35 |
| 1 | 4b. Pro | operty, homeowner's, or | renter's insurance | | | 4b. | \$138.00 |
| 4c. Home maintenance, repair, and upkeep expenses 4c. \$50.00 | 4c. Ho | ome maintenance, repair | , and upkeep expenses | | | 4c. | \$50.00 |
| 4d. Homeowner's association or condominium dues 4d. \$0.00 | 4d. Ho | meowner's association | or condominium dues | | | 4d. | \$0.00 |

Document Ruacho-Hernandez Joaquin Debtor 1 Case Number (if known) _

| | First Name Middle Name Lock Name | | | _ |
|-----|---|------|--------------|---------------|
| | First Name Middle Name Last Name | | Your expense | es |
| | | _ | <u> </u> | \$0.00 |
| 5. | Additional Mortgage payments for your residence, such as home equity loans | 5. | | \$0.00 |
| 6. | Utilities: 6a. Electricity, heat, natural gas | 6a. | | \$350.00 |
| | 6b. Water, sewer, garbage collection | 6b. | | \$100.00 |
| | 6c. Telephone, cell phone, internet, satellite, and cable service | 6c. | | \$493.00 |
| | 6d. Other. Specify: | 6d. | \$ | 0.00 |
| 7. | Food and housekeeping supplies | 7. | | \$500.00 |
| 3. | Childcare and children's education costs | 8. | | \$0.00 |
|). | Clothing, laundry, and dry cleaning | 9. | | \$100.00 |
| 0. | Personal care products and services | 10. | | \$60.00 |
| 11. | Medical and dental expenses | 11. | | \$150.00 |
| 12. | Transportation. Include gas, maintenance, bus or train fare. | 12. | | \$314.00 |
| | Do not include car payments. | | | |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | | \$0.00 |
| 4. | Charitable contributions and religious donations | 14. | | \$60.00 |
| 5. | Insurance. | | | |
| | Do not include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | 15a. Life insurance | 15a. | | \$0.00 |
| | 15b. Health insurance | 15b. | | \$698.00 |
| | 15c. Vehicle insurance | 15c. | | \$300.00 |
| | 15d. Other insurance. Specify: | 15d. | | \$0.00 |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | | |
| | Specify: | 16. | | \$0.00 |
| 7. | Installment or lease payments: | | | |
| | 17a. Car payments for Vehicle 1 | 17a. | | \$0.00 |
| | 17b. Car payments for Vehicle 2 | | | \$0.00 |
| | 17c. Other. Specify: | 17c. | | \$0.00 |
| | 17d. Other. Specify: | 17d. | | \$0.00 |
| 8. | Your payments of alimony, maintenance, and support that you did not report as deducted | | | |
| | from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | | \$0.00 |
| 9. | Other payments you make to support others who do not live with you. | | | |
| | Specify: | 19. | | \$0.00 |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | | | |
| | 20a. Mortgages on other property | 20a. | | \$ 0.00 |
| | 20b. Real estate taxes | 20b. | \$ | 0.00 |
| | 20c. Property, homeowner's, or renter's insurance | | \$ | 0.00 |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| | 20e. Homeowner's association or condominium dues | 20e. | \$ | 0.00 |

Official Form 106J Record # 741123 Schedule J: Your Expenses Page 2 of 3 Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main

Document Ruacho-Hernandez Page 37 of 60 Joaquin Debtor 1 Case Number (if known) First Name Middle Name Last Name \$0.00 21. 21. Other. Specify: 22.. Your monthly expense: Add lines 4 through 21. \$4,352.35 22. The result is your monthly expenses. 23. Calculate your monthly net income. 23a. \$3,639.76 Copy line 12 (your comibined monthly income) from Schedule I. 23a. \$4,352.35 23b. Copy your monthly expenses from line 22 above. 23b.--\$712.59 23c. Subtract your monthly expenses from your monthly income. 23c. The result is your monthly net income.

24. Do you expect an increase or decrease in your expenses within the year after you file this form?
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

X No Yes.

Explain Here:

Official Form 106J Record # 741123 Schedule J: Your Expenses Page 3 of 3

| Fill in this in | nformation to identify y | our case: | |
|--------------------------------------|--------------------------|----------------------|------------------|
| Debtor 1 | Joaquin | | Ruacho-Hernandez |
| | First Name | Middle Name | Last Name |
| Debtor 2 | Patricia | | Medrano |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States Case Number (If known) | | NORTHERN District of | (State) |

Official Form 106 Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | |
|--|---|
| Did you pay or agree to pay someone who is NOT an attorned | ey to help you fill out bankruptcy forms? |
| Yes. Name of Person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | |
| Under penalty of perjury, I declare that I have read the sumn correct. | nary and schedules filed with this declaration and that they are true and |
| | |
| 🗶 /s/ Joaquin Ruacho-Hernandez | 🗶 /s/ Patricia Medrano |
| Signature of Debtor 1 | Signature of Debtor 2 |
| Date 07/06/2017 MM / DD / YYYY | Date 07/06/2017 MM / DD / YYYY |
| | |

Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| | per (if known). Answer every question. | o una form. On the to | p of any additional pages, write your name and case | |
|-----|--|---|---|-------------------------------|
| ı | IT 1: Give Details About Your Marital Status and Where Yo | ou Lived Before | | |
| 01. | What is your current marital status? | | | |
| | Married | | | |
| | Not married | | | |
| 02 | During the last 3 years, have you lived anywhere other tha | n where you live now | ν? | |
| | No.Yes. List all of the places you lived in the last 3 years. Do | o not include where vo | ou live now. | |
| | _ | , . | | |
| | Debtor 1 | Dates Debtor 1 lived there | Debtor 2: | Dates Debtor 2 lived there |
| 03 | Within the last 8 years, did you ever live with a spouse or property states and territories include Arizona, California, and Wisconsin.) | legal equivalent in a Idaho, Louisiana, Ne | community property state or territory? (Community vada, New Mexico, Puerto Rico, Texas, Washington, | |
| | No. Yes. Make sure you fill out Schedule H: Your Codebtors (| (Official Form 106H) | | |
| | Tes. Make sure you fill out obtedule 11. Tour obdebtors (| (Official Form 10011). | | |
| | art 2: Explain the Sources of Your Income | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Document Page 40 of 60

| ebtor 1 | Joaquin First Name | Middle Name | Ruacho-Hern | nandez | Case Number (if known) | |
|---------|--------------------------|-----------------------|--|---|---|---|
| 4 Did | | | | s during this year or the to | wo previous calendar years? | |
| Fill i | in the total amount of | income you received f | rom all jobs and all business ne that you receive together, | es, including part-time acti | vities. | |
| | No. | | | | | |
| ` | Yes. Fill in the details | i | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply | Gross income (before deductions and exclusions) | Sources of income Check all that apply | Gross income (before deductions and exclusions) |
| | From January 1 of c | urrent year until | Wages, commissions, | \$19,232 | Wages, commissions, | \$10,830 |
| | the date you filed fo | r bankruptcy: | bonuses, tips Operating a business | | bonuses, tips Operating a business | |
| | For last calendar yea | ar: | Wages, commissions, | \$33,032 | Wages, commissions, | \$10,000 est. |
| | (January 1 to Decem | nber 31, 2016) | bonuses, tips Operating a business | | bonuses, tips Operating a business | |
| | For the calendar yea | ar before that: | Wages, commissions, | \$35,000 est. | Wages, commissions, | \$10,000 est. |
| | (January 1 to Decem | nber 31, 2015) | bonuses, tips Operating a business | | bonuses, tips Operating a business | |
| 1 | No. | | ch source separately. Do not | include income that you is | sted III lille 4. | |
| Π, | Yes. Fill in the details | | 5 | | 211 | |
| | | | Debtor 1 Sources of income | Gross income | Debtor 2 Sources of income | Gross income |
| | | | Describe below. | (before deductions and exclusions) | | (before deductions and exclusions) |
| Part 3 | List Certain Pay | ments You Made Before | e You Filed for Bankruptcy | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Document Page 41 of 60

| eptor | Joaquili | | Ruacilo-neille | <u>an</u> uez | Case Number (If known) _ | |
|-------------|-----------------------|---|------------------------------|-----------------------------|--------------------------|--------------------------|
| | First Name | Middle Name | Last Name | | | |
| 06 A | Are either Debte | or 1's or Debtor 2's debts prima | rily consumer debts? | | | |
| | | | | | | |
| | No. Neither | Debtor 1 nor Debtor 2 has prime | arily consumer debts. Cor | nsumer debts are defined | in 11 U.S.C. § 101(8) a | S |
| | "incurre | ed by an individual primarily for a p | personal, family, or househ | old purpose." | | |
| | During | the 90 days before you filed for be | ankruptcy, did you pay any | creditor a total of \$6,225 | * or more? | |
| | | | | | | |
| | ∐ No | . Go to line 7. | | | | |
| | Пу | | | | | |
| | _ | s. List below each creditor to who al amount you paid that creditor. I | | | | |
| | | al amount you paid that creditor. t ld support and alimony. Also, do ા | | • | | |
| | | adjustment on 4/01/16 and every | • • | - | - | |
| | 542,551 15 | aajaaamam on non to ana atany | o youro and marior outon | 55 u 5 5. u5. u5 uut | or adjudantona | |
| ı | Yes. Debto | or 1 or Debtor 2 or both have prin | marily consumer debts. | | | |
| | During | g the 90 days before you filed for | bankruptcy, did you pay an | y creditor a total of \$600 | or more? | |
| | Пио | . Go to line 7. | | | | |
| | □ 140 | . Oo to line 7. | | | | |
| | ■ Ye | s. List below each creditor to who | m you paid a total of \$600 | or more and the total am | ount you paid that | |
| | | editor. Do not include payments fo | - | | - | |
| | | mony. Also, do not include payme | | | it and | |
| | 4 | | | annuproy ease. | | |
| | | | | | | |
| | | | Dates of payments | Total amount paid | Amount you still o | owe Was this payment for |
| | | | paymonto | | | |
| | | | | 0.457 | A 00 005 | |
| | | FORD CRED Po Box Box | _ Monthly | \$ 2,157 | \$ 30,305 | Mortgage |
| | | 542000 Omaha NE 68154 | _ | | | Car Credit card |
| | | | _ | | | Loan repayment |
| | | | _ | | | Suppliers or vendors |
| | | | | | | Other |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 07 V | – Vithin 1 vear he | fore you filed for bankruptcy, did | vou make a navment on a d | deht vou owed anvone w | ho was an insider? | |
| | • | your relatives; any general partne | | | | al partner; |
| | • | which you are an officer, director, one for a business you operate a | • | | • | , , , |
| | | pport and alimony. | s a sole proprietor. TT 0.5. | .c. § 101. Include payme | nis for domestic support | obligations, |
| Г | No. | | | | | |
| | | payments to an insider. | | | | |
| • | _ | . · | Dates of | Total amount | Amount you still | Reason for this payment |
| | | | payment | paid | owe | |
| | Sister | | 03/2017 | \$1,000 | \$0 | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Document Page 42 of 60

| Debto | | Middle Name | Nuaciio-neii | nanuez | Case Number (If Kn | nown) | |
|-------|------------------------------|-----------------------------|----------------------------|--------------------------|------------------------|-------------------|-----------------------|
| | First Name | Middle Name | Last Name | | | | |
| 08 | Within 1 year before you | filed for bankruptcy, did y | ou make any payments o | or transfer any property | on account of a debt | t that benefited | |
| | an insider? | | | | | | |
| | Include payments on deb | ts guaranteed or cosigne | d by an insider. | | | | |
| | No. | | | | | | |
| | | s to on incider | | | | | |
| | Yes. List all payments | s to an insider. | | | | | |
| | | | Dates of | Total amount | Amount you still | | n for this payment |
| | | | payment | paid | owe | Include | e creditor's name |
| P | art 4: Identify Legal ac | tions, Repossessions, and | f Foreclosures | | | | |
| 09 | Within 1 year before you | filed for bankruptcy were | you a party in any lawsu | it court action or admi | nistrative proceeding | 1? | |
| | List all such matters, inclu | | | | | | ody |
| | modifications, and contra | | | | | | • |
| | No. | | | | | | |
| | = | | | | | | |
| | Yes. Fill in the details | | | | | | |
| | | | Nature of the case | Court or | agency | | Status of the case |
| 10 | Within 1 year before you | | any of your property repo | ossessed, foreclosed, ga | arnished, attached, s | seized, or levied | 1? |
| | Check all that apply and | fill in the details below. | | | | | |
| | No. Go to line 11 | | | | | | |
| | Yes. Fill in the inform | ation below | | | | | |
| | 100.1 111 111 1110 111101111 | adon bolow. | | | | | |
| | | | Doscribe the proper | ·h. | | Date | Value of the property |
| | 01: 5: 0 | | Describe the proper | - | | | |
| | Chicago Finance Ce | enter | 2010 Chrysler Sebri | ing | | 02/2017 | \$3,700 |
| | 4024 W. Montrose A | Ave Chicago, IL | | | | | |
| | 60654 | | | | | | |
| | | | | | | | |
| | | | Explain what happe | ned | | | |
| | | | Property was re | enossessed | | | |
| | | | Property was fo | | | | |
| | | | _ | | | | |
| | | | Property was g | | | | |
| | | | Property was a | tached, seized, or levie | d. | | |
| | | | | | | | |
| | | | | | | | |
| 11 | Within 90 days before yo | ou filed for bankruptcy, | did any creditor, includi | ng a bank or financial i | nstitution, set off ar | ny amounts fro | m your accounts |
| | or refuse to make a payı | ment because you owed | a debt? | | | | |
| | No. Go to line 11 | | | | | | |
| | | ation holow | | | | | |
| | Yes. Fill in the inform | | | | | | |
| 12 | Within 1 year before you | • • • | | n the possession of ar | n assignee for the be | enefit of credit | ors, a |
| | court-appointed receiver | r, a custodian, or anothe | roniciair | | | | |
| | No. | | | | | | |
| | ∐ Yes. | | | | | | |
| | List Cartain Ciffs | and Contributions | | | | | |
| | | and Contributions | | | | | |
| 13 | Within 2 years before yo | ou filed for bankruptcy, d | lid you give any gifts wit | th a total value of more | than \$600 per pers | on? | |
| | No. | | | | | | |
| | Yes. Fill in the details | for each gift | | | | | |
| 14 | Within 2 years before yo | = | lid you give any gifte or | contributions with a to | stal value of more th | an \$600 to any | charity? |
| 14 | within 2 years before yo | ou meu for bankruptcy, o | ilu you give ally gills of | contributions with a to | nai value oi more tii | an \$600 to any | Chanty |
| | No. | | | | | | |
| | Yes. Fill in the details | for each gift. | | | | | |
| | | | | | | | |
| | art 6: List Certain Loss | ies | | | | | |
| | | | | | | | |
| 15 | Within 1 year before you | ı filed for bankruptcy or | since you filed for bank | ruptcy, did you lose an | ything because of t | heft, fire, other | r disaster, or |
| | gambling? | | | | | | |
| | No. | | | | | | |
| | = | £ | | | | | |
| | Yes. Fill in the details | ior each glπ. | | | | | |

Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Document Page 43 of 60

Joaquin Ruacho-Hernandez Case Number (if known) First Name Middle Name Last Name **List Certain Payments or Transfers** Part 7: Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details **Party Contact Info** Description and value of any property transferred Date payment Amount of payment or transfer Geraci Law L.L.C. \$1,550.00 55 E. Monroe Street #3400 Chicago,IL 60603 **Party Contact Info** Description and value of any property transferred Date payment Amount of payment or transfer Credit Counseling Services Hananwill Credit Counseling 2017 \$25.00 115 N. Cross St. Robinson, IL 62454 17 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No. Yes. Fill in the details. 18 Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No. Yes. Fill in the details for each gift. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details for each gift. List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No. Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before instrument closed, sold, moved, closing or transfer

or transferred

Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Document Page 44 of 60

Joaquin Ruacho-Hernandez Case Number (if known) Debtor 1 First Name Middle Name Last Name 21 Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No. Yes. Fill in the details. Who else had access to it? Describe the contents Do you still 22 Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No. Yes. Fill in the details. Who else has or had access to it? Describe the contents Do you still have it? **Identify Property You Hold or Control for Someone Else** Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Where is the property? Describe the property Value **Give Details About Environmental Information** Part 10: For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24 Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No. Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice 25 Have you notified any governmental unit of any release of hazardous material? No. Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice 26 Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. Nature of the case Status of the case Court or agency Give Details About Your Business or Connections to Any Business Part 11: 27 Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation

Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Document Page 45 of 60

| | La constru | | Doddinone | i ago it | 3 01 00 | |
|------------|---|---------------------------------|-------------------------|--------------------|---|--|
| ebtor 1 | Joaquin | | Ruacho-Hern | <u>an</u> dez | Case Number (if known) | |
| | First Name | Middle Name | Last Name | | | |
| _ | No None of the obey | ve applies. Go to Part 12. | | | | |
| | | | | | | |
| | Yes. Check all that a | pply above and fill in the deta | ils below for each busi | ness. | | |
| | | | | | | |
| | thin 2 years before yo titutions, creditors, o | | you give a financial st | atement to anyo | ne about your business? Include all financial | |
| | No. | | | | | |
| | Yes. Fill in the details | | | | | |
| Ц | res. r iii iir tile details | | | | | |
| | | Date iss | ued | | | |
| Part 12 | Sign Below | | | | | |
| | | | | | | |
| 4 - | .S.C. §§ 152, 1341, 15 | | 4. | | | |
| X | /s/ Joaquin Ruac | | | Patricia Medra | | |
| | Signature of Debtor | 1 | Sig | nature of Debtor 2 | 2 | |
| | | | | | | |
| | Date 07/06/2017 | | Dat | e 07/06/2017 | | |
| | MM / DD / Y | YYYY | Dat | MM / DD / ` | YYYY | |
| | , 22 , . | | | , 55 , | | |
| | | | | | | |
| Did y | you attach additional | pages to Your Statement of | f Financial Affairs for | Individuals Filin | g for Bankruptcy (Official Form 107)? | |
| | M- | | | | | |
| _ | | | | | | |
| □ ' | Yes | | | | | |
| B: 1 | | | | | f0 | |
| Dia 3 | you pay or agree to p | ay someone who is not an a | ttorney to neip you ti | I out bankruptcy | / forms? | |
| | No | | | | | |
| = | | | | | | |
| 'Ш | Yes. Name of person | 1 | | Atta | ach the Bankruptcy Petition Preparer's Notice, | |
| | | | | | Declaration, and Signature (Official Form 119). | |

| Fill in this in | formation to identify you | | | d 07/17/17 15:59:2 of 60 | 28 Desc Main | |
|----------------------|--|-----------------------------|--|-------------------------------|---|-------|
| Debtor 1 | Joaquin | | Ruacho-Hernandez | | | |
| Debtor 2 | First Name Patricia | Middle Name | Last Name Medrano | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the : | NORTHERN District of II | | | | |
| Case Number | r | | (State) | | Check if this is an | |
| (If known) | | | - | | amended filing | |
| Official F | orm 108 | | | | | |
| | | for Individual | s Filing Under Chapt | er 7 | | 12/15 |
| | dividual filing under chap | | | | | |
| ■ creditors hav | ve claims secured by you | r property, or | | | | |
| ■ you have leas | sed personal property ar | d the lease has not expi | red. | | | |
| You must file th | nis form with the court w | ithin 30 days after you fil | le your bankruptcy petition or by the | date set for the meeting of c | reditors, | |
| whichever is ea | arlier, unless the court ex | tends the time for cause | e. You must also send copies to the o | reditors and lessors you list | | |
| • | | • | equally responsible for supplying co | orrect information. | | |
| | nust sign and date the for | | | | | |
| • | e and accurate as possib e and case number (if kn | • | ed, attach a separate sheet to this fo | rm. On the top of any additio | nal pages, | |
| | e and case number (ii kii List Your Creditors Who H | | | | | |
| 1. For any cre | <u>-</u> | Part 1 of Schedule D: Cre | editors Who Have Claims Secured by | Property (Official Form 106 | D), fill in the | |
| information | below. | | | | | |
| Identify the | creditor and the propert | y that is collateral | What do you intend to do secures a debt? | with the property that | Did you claim the property as exempt on Schedule C? | |
| Creditor's | | | Surrender the pro | pperty | No | |
| name: | FORD CRED | | Retain the proper | ty and redeem it | — ∏ Yes | |
| Dogoriptic | on of 2016 Ford F-150 | with over 7,000 miles | Retain the proper | ty and enter into a | ☐ 1C3 | |
| Description | OH OF Zevereign 100 | William 6761 7,000 Hillion | Reaffirmation Agi | - | | |
| property securing of | debt: | | Retain the proper | | | |
| | | | | , | | |
| Creditor's | | | Surrender the pro | pperty | □ No | |

Debtor 1

Case 17-21219 Joaquin

Doc 1

Filed 07/17/17 Ruacho-Hernandez Document

Entered 07/17/17 15:59:28 Page 47 of 60 umber (if known)

Desc Main

List Your Unexpired Personal Property Leases

| For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). | | | | | |
|--|----------------------------|--|--|--|--|
| Describe your unexpired personal property leases | Will the lease be assumed? | | | | |
| Lessor's name: Felipe Roman | No | | | | |
| Description of leased property: | Yes | | | | |
| Lessor's name: | □ No | | | | |
| Description of leased property: | Yes | | | | |
| Lessor's name: | □ No | | | | |
| Description of leased property: | Yes | | | | |
| Lessor's name: | □ No | | | | |
| Description of leased property: | ☐ Yes | | | | |
| Lessor's name: | □ No | | | | |
| Description of leased property: | ☐ Yes | | | | |
| Lessor's name: | □ No | | | | |
| Description of leased property: | ☐ Yes | | | | |
| Lessor's name: | □ No | | | | |
| Description of leased property: | ☐ Yes | | | | |
| Part 3: Sign Below | | | | | |
| Inder penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt a | nd any | | | | |

personal property that is subject to an unexpired lease.

🗶 /s/ Joaquin Ruacho-Hernandez Signature of Debtor 1

🗶 /s/ Patricia Medrano Signature of Debtor 2

Date Dated: 07/06/2017 MM / DD / YYYY

Date _ Dated: 07/06/2017 MM / DD / YYYY

Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Document Page 48 of 60

B2030 (Form 2030) (12/15)

United States Bankruptcy Court

NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In re | |
|---|----------|
| Joaquin Ruacho-Hernandez and Patricia Medrano | Case No: |

/ Debtors

Chapter: Chapter 7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept

Prior to the filing of this statement I have received

Balance Due

Post Case-Filing Work Pre-Paid:

S350.00

The source of the compensation paid to me was:

Debtor(s)

Other: (specify)

The source of compensation to be paid to me is:

Debtor(s) Other: (specify)

I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

- 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
 - Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- **6.** By agreement with the debtor(s), the above-disclosed fee does not include the following service: Fee does NOT include any work done post-filing.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.

Date:07/17/2017/s/ Joseph Mark D'OnofrioDateSignature of Attorney

Geraci Law L.L.C.

Name of law firm

Record # 741123 Page 1 of 1

Document Page 49 of 60 Geraci Law L.L.C. Illinois Indiana Wisconsin Headquarters: 55 E. Monroe Street, #3400 Chicago, IL 60603 866.925.0707 CLIENT CORNER WWW.INFOTAPES.COM

PFG Rec# 741-123 Mr. & Mrs. Ruacho-Hernandez

Date: 7/6/2017

Consultation Attorney: **JOD**

Record #: 741-123



Retainer Agreement Chapter 7 - Pre-filing

| Services before filing in Court: I retain Geraci Law L.L.C. to prepare to file a Chapter 7 bankruptcy petition in court. I agree to pay, by |
|--|
| debit only, a flat fee for services before filing in court of $\frac{1,200.00}{2}$ |
| debit only, a flat fee for services before filing in court of \$ 1,200.00 at \$ {} ber {} starting {} starting {} and \$ {} within 60 days of today. Bankruptcy is time-sensitively many part than this amount to pre-pay post-filing services. After filing in court, any balance on the pre-filing fee is discharged. We will |
| and \${} I will obtain from { within 60 days of today. Bankruptcy is time-sensitivel |
| may pay more than this amount to pre-pay post-ming services. After ming in court, any balance on the pre-ming lee is also her got. |
| start preparing your documents as soon as you sign this contract. Work before signing is no charge. Work or Costs advanced AFTER filing |
| in Court is not included in the pre-filing amount, unless you pay us for it in advance: |
| |
| After we file your Chapter 7 bankruptcy in Court, we will advance your Court Cost of \$335, and the flat fee for services after case filing is |
| $\frac{1.195.00}{0}$ & \$335 = \$ $\frac{1.530.00}{0}$ total flat fee. We will present you with an agreement to repay the \$335, and pay a fee for our |
| services after filing through Discharge or case closing without discharge. Whether or not you sign a post-filing agreement is entirely |
| voluntary: you are not required to retain Geraci Law for post-bankruptcy services. You may hire some other law firm to finish your bankruptcy |
| and Geraci Law may withdraw from representing you. |
| and Solds Earl may maintain nom representing your |
| The flat fee for pre-filing work pays for: consultation after hiring us, (before retaining us is free) preparation petition and schedules, means test & |
| statement of financial affairs; phone calls, emails, web messages; processing and reviewing documents that we requested from you including faxes, email |
| attachments, web uploads and mail; office appointment to review and sign your petition; filing your case in court. Excluded: appearance in any court or |
| proceeding: taking calls from your creditors or bill collectors. If you decide to pre-pay, or pay for ALL services before and after we file your case in |
| court, all work until case closing is included except: missed section 341 meetings; amendments to schedules; adversary proceedings; any motions |
| including to reopen, avoid judgment liens, for enlargement of time; any contested matter including but not limited to objections to exemptions, motions to |
| dismiss; attending rule 2004 examinations; reviewing documents that we did not specifically request from you; appearance other than bankruptcy court. |
| |
| Flat fee. With "flat fee", rather than hourly, you know in advance your entire cost unless additional work is required and it usually is cheaper, but you may |
| choose to pay for our services billed hourly at \$75 -\$450/hour, and pay in advance a security retaier, which may cost you more, or less than a flat fee. |
| Advance Payment Retainer. Payments on flat fee or hourly become our property on payment and are deposited into our operating account, not into a |
| client trust account. We will only refund unearned fees You may enter into a security retainer agreement with another law firm: we will not because you |
| may lose funds held in our trust account which may be assets in a Chapter 7. |
| Termination. If you decide not to proceed, delay, fail to respond, fail to pay my attorneys or provide all information & sign my petition |
| according to this schedule, I agree that Geraci Law may discontinue work and charge me for the work done to date at hourly rates shown |
| according to this schedule, I agree that Geraci Law may discontinue work and charge the for the work done to date at hours rates shown |
| above. We will only refund fees not earned. Wisconsin: We will submit any unresolved dispute about the fee to binding arbitration within 30 days of receiving written notice of the dispute. You may file a claim with the Wisconsin Lawyers' Fund for Client Protection if the we fail to provide a refund of |
| unearned advanced fees. If you dispute the amount of the fee and want that dispute to be submitted to binding arbitration, you must provide written notice |
| of the dispute to Geraci Law within 30 days of the mailing of the accounting. If we are unable to resolve the dispute to the satisfaction of you within 30 days |
| after notice of the dispute from the client, we shall submit the dispute to binding arbitration. |
| and house of the dispute from the chair community and the party to the state of the |
| Time matters: You agree: to fully cooperate with us and provide all information required; use Client Corner and not to cause excessive work; that more |
| than one attorney or staff will work on your file there is no extra charge for the entire Geraci Law Team, unlike single attorney "law firms". Change in |
| circumstances: This flat fee is based on the facts you told us. If that changes, your fee may change. Exemption laws only protect a limited amount of |
| property. File Chapter 13 if you have property not claimed as exempt, or risk turn over "non-exempt" property to a Trustee. No guarantee of Discharge: |
| Creditors or others may object to a chapter 7 discharge of certain debts or to any discharge, for a variety of reasons. Debts not discharged: student |
| loans; educational debts and tuition; most tax debts; undisclosed debts; maintenance or support; fines; fraud, stealing or intentional injury claims, debts |
| after filing including HOA dues; other debts listed in your green folder as usually not discharged. No discharge if you don't take the 2nd educational |
| course. I will not transfer or acquire any property or incur any credit or debt before filing, and I must make full disclosure of all income, expenses, debts |
| 12.16.2017 Visit of de de la laction leulio. Si |
| Date: 01/ boyles X/ fallen Lunks HUZ |
| Joaquin Ruacho-Hernandez (Debtor) Patricia Medrano (Joint Debtor) |
| Attorney for the Debtor(s), Representing Geraci Law L.L.C. rev 161112 |
| Attorney for the Debtor(s), Representing Geraci Law L.L.C. rev 161112 |
| |
| |

Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Document Page 50 of 60

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

Joaquin Ruacho-Hernandez and Patricia Medrano / Debtors

In re

Bankruptcy Docket #:

Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

Dated: 07/06/2017

/s/ Joaquin Ruacho-Hernandez

Joaquin Ruacho-Hernandez

X Date & Sign

Dated: 07/06/2017 /s/ Patricia Medrano X Date & Sign
Patricia Medrano

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

Document Page 51 of 60 In re Joaquin Ruacho-Hernandez and Patricia Medrano / Debtors

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

UNITED STATES BANKRUPTCY COURT

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

Record # 741123 B 201A (Form 201A) (11/11) Page 1 of 2

Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main

Form B 201A, Notice to Consumer Debtor(s)

In re Joaquin Ruacho-Hernandez and Patricia Medrano / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 07/06/2017 | /s/ Joaquin Ruacho-Hernandez | |
|-------------------|---------------------------------|--|
| | Joaquin Ruacho-Hernandez | |
| Dated: 07/06/2017 | /s/ Patricia Medrano | |
| | Patricia Medrano | |
| Dated: 07/17/2017 | /s/ Joseph Mark D'Onofrio | |
| | Attorney: Joseph Mark D'Onofrio | |

Record # 741123 Form B 201A, Notice to Consumer Debtor(s) Page 2 of 2

Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Document Page 53 of 60

| Debtor ' | 1 Joaquin 🔻 | | Ruacho-Hernandez | Case Number (if know | vn) | |
|----------------|---|---|--|---------------------------------|---|--|
| | First Name | Middle Name | Last Name | | | : |
| | | | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | |
| 8. Une | employment compensa | ation | | \$0.00 | \$0.00 | |
| Do | not enter the amount if | you contend that the amount received lot. Instead, list it here: | was a benefit | | | |
| Fo | r you | | | | | |
| Fo | r your spouse | | | | | |
| | nsion or retirement inc nefit under the Social S | come. Do not include any amount rece | ived that was a | \$0.00 | \$0.00 | |
| Do as | not include any benefit a victim of a war crime, | urces not listed above. Specify the so s received under the Social Security A a crime against humanity, or internati t other sources on a separate page an | ct or payments received onal or domestic | | | |
| 10a | a. Pastor | | | \$500.00 | \$ 0.00 | |
| 101 |) | | | \$ 0.00 | \$0.00 | |
| 100 | c. Total amounts from se | eparate pages, if any. | | \$500.00 | \$0.00 | |
| | | ent monthly income. Add lines 2 through for Column A to the total for Column | | \$3,955.33 | + \$1,805.00 = | \$5,760.33 |
| Part | 2: Determine Whe | ther the Means Test Applies to You | | | | |
| | • | onthly income for the year. Follow th | The state of the s | | | ************************************** |
| 12a | Copy your total curr | ent monthly income from line 11 | | Copy line 11 here | 12a. | \$5,760.33 |
| | Multiply by 12 (the r | number of months in a year). | | | 200000000000000000000000000000000000000 | x 12 |
| 12b | The result is your ar | nnual income for this part of the form. | | | 12b. | \$69,123.96 |
| 13. C a | lculate the median fam | nily income that applies to you. Follow | w these steps: | | | |
| Fill | in the state in which yo | ou live. | IL | | | |
| Fili | in the number of people | e in your household. | 6 | | | |
| То | find a list of applicable | come for your state and size of house median income amounts, go online us This list may also be available at the ba | ing the link specified in the s | | 13. | \$108,016.00 |
| 14. Ho | w do the lines compar | e? | | | | |
| 14a | . X ine 12b is less th Go to Part 3. | an or equal to line 13. On the top of pa | age 1, check box 1, There is | no presumption of abuse. | | |
| 14b | | han line 13. On the top of page 1, che ill out Form 122A-2. | ck box 2, The presumption | of abuse is determined by For | m 122A-2. | |
| Part | 3: Sign Below | | | | | |
| | By signing here, I de | eclare under penalty of perjury that the | information on this stateme | nt and in any attachments is tr | ue and correct | |
| | N | | | 27 | / / | |
| | Janu | - Und He | z = 1 | Valley 19 | edunos | |
| | Joaq | uin Ruacho-Hernandez | / | Patricia Medrar | 10 | ************************************** |
| | Date:: <u>() 7</u> | <u>/ 66 /2017</u> | Date:: | 07/06 /2017 | | |
| | If you checked line ' | 14a, do NOT fill out or file Form 122A- | 2. | | | |
| | If you checked line | 14b, fill out Form 122A-2 and file it witi | this form. | | | |

Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Document Page 54 of 60

| Debtor 1 | Joaquin | | Ruacho-Hernandez | |
|--------------------|------------|-------------|------------------|--|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Patricia | | Medrano | |
| Spouse, if filing) | First Name | Middle Name | Last Name | |
| Jnited States | | | (State) | |

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | | | | |
|---|---|--|--|--|
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | |
| No No | | | | |
| Yes. Name of Person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | |
| | | | | |
| | | | | |
| | e summary and schedules filed with this declaration and that they are true and | | | |
| Signature of Debtor 1 | S & Jacqui Praches Hd 2 | | | |
| Date : 0 7 / 66 /2017 | Date : <u>0 7/ 06/2017</u> MM / DD / YYYY | | | |

Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Document Page 55 of 60

Ruacho-Hernandez Case Number (if known) Joaquin Debtor 1 Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts do as "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and Do you estimate that after administrative expenses are paid that funds will be available to distribute to unsecured creditors? any exempt property is excluded and administrative expenses Yes. are paid that funds will be available for distribution to unsecured creditors? 1-49 1,000-5,000 **25,001-50,000** 18. How many creditors do **5,001-10,000 50,001-100,000** you estimate that you 50-99 owe? **1**0,001-25,000 **100-199** ☐ More than 100,000 200-999 How much do you \$0-\$50,000 □ \$1,000,001-\$10 million □\$500,000,001-\$1 billion estimate your assets to \$50,001-\$100,000 ☐ \$10,000,001-\$50 million □\$1,000,000,001-\$10 billion be worth? **\$100,001-\$500,000** □ \$50,000,001-\$100 million □\$10,000,000,001-\$50 billion ☐ \$100,000,001-\$500 million \$500,001-\$1 million ☐More than \$50 billion How much do you \$0-\$50,000 □ \$1,000,001-\$10 million □\$500,000,001-\$1 billion estimate your liabilities \$50,001-\$100,000 ☐ \$10,000,001-\$50 million □\$1,000,000,001-\$10 billion to be? \$100,001-\$500,000 □ \$50,000,001-\$100 million □ \$10,000,000,001-\$50 billion □ \$500,001-\$1 million ☐ \$100,000,001-\$500 million ☐ More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Executed on : 07,06/2017 MM / DD / YYYY

Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Document Page 56 of 60

| Debto | r 1 | Joaquin ¹ | Ru | acho-Hernandez | Case Number (if known) |
|-------|------------|--------------------------------|--|---------------------------------------|---|
| | | First Name | Middle Name Las | t Name | |
| 24 | Has | any governmental unit noti | ified you that you may be liable | or potentially liable und | er or in violation of an environmental law? |
| | | | | | |
| | 1 | | | | |
| | י ט | Yes. Fill in the details. | | | |
| | | | Governmental unit | | Environmental law, if you know it Date of notice |
| 25 | Have | e vou notified any governm | ental unit of any release of haz | ardous material? | |
| | _ | | 5.11.11 G. 11.17 1 5.02.55 5 1 1 1 1 2 1 | | |
| | = | No. | | | |
| | | Yes. Fill in the details. | | | |
| | | | Governmental unit | | Environmental law, if you know it Date of notice |
| 25 | | | .41-1-1 4 1 1 4 41 | di d | |
| 20 | пач | e you been a party in any ju | idicial of administrative procee | ding under any environir | nental law? Include settlements and orders. |
| | 1 | No. | | • | |
| | | Yes. Fill in the details. | | | |
| | | | Court or agency | | Nature of the case Status of the case |
| | | | | | |
| Pa | art 11: | Give Details About Your | Business or Connections to Any | Business | |
| 27 | Mith | nin 4 years before you filed: | for hankruptov, did you own a | hueinage or have any of | the following connections to any business? |
| | | | | _ | - |
| | | | employed in a trade, professio | · · | · |
| | | | ability company (LLC) or limited | d liability partnership (LL | .P) |
| | | A partner in a partnershi | ip | | |
| | | An officer, director, or m | nanaging executive of a corpora | ation | |
| | | An owner of at least 5% | of the voting or equity securities | es of a corporation | |
| | _ | | | | |
| | 1 | No. None of the above applie | es. Go to Part 12. | | |
| | □ ' | Yes. Check all that apply abo | ove and fill in the details below for | r each business. | |
| | | | | | |
| 28 | With | in 2 years before you filed: | for bankruptcy, did you give a | financial statement to an | yone about your business? Include all financial |
| | | tutions, creditors, or other | | | • |
| | | No. | | | |
| | \Box | Yes. Fill in the details. | | | |
| | | | Date issued | | |
| | | | | | |
| Pa | rt 12: | Sign Below | | | |
| ı | have | read the answers on this S | Statement of Financial Affairs a | nd any attachments and | I declare under penalty of perjury that the |
| a | inswe | ers are true and correct. I un | nderstand that making a false s | statement, concealing pro | operty, or obtaining money or property by fraud |
| | | | case can result in fines up to \$ | | |
| 1 | 18 U.S | S.C. §§ 152, 1341, 1519, and | 3571. | | |
| | | 24 | 1. | / | 1 |
| | 4- | Value 1 | Medvanos | \mathcal{N} | medo USZ |
| | X, | Di Colores V | 000100100 | * (sog | m freedo III |
| | • | Signature of Debtor 1 | | Signature of Debt | or 2 |
| | | 67. 66 | | | |
| | I | Date 67 / 66 /2017 | | Date 67 / 69 MM / DD | <u>6</u> /2017 |
| | | MM / DD / YYYY | | MM / DD | / YYYY |
| | | | | | |
| | Did yo | ou attach additional pages t | to Your Statement of Financial | Affairs for Individuals Fi | ling for Bankruptcy (Official Form 107)? |
| | No. | • | | | |
| | = | | | | |
| | ĻΥ | es | | | |
| г |)id va | ou bay or agree to have one | eone who is not an attorney to | heln vou fill out bankers | tov forme? |
| _ | . y | F-1 or agree to hay some | some who is not an attorney to | neib Aon im ont nauktab | tey tornia: |
| | N | • | | | |
| | □ Ye | es. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, |
| | _ | | | · · · · · · · · · · · · · · · · · · · | Declaration, and Signature (Official Form 119). |
| | | | | | • |

Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main Document Page 57 of 60

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

in re

Joaquin Ruacho-Hernandez and Patricia Medrano / Debtors

Bankruptcy Docket #:

Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

| | DECLARE UNDER | R PENALTY OF PERJURY THAT TH | E FOREGOING IS TRUE AN | ID CORRECT. |
|--|------------------------------|------------------------------|------------------------|---------------|
| Dated: <u>07</u> / | <u>06</u> , _{/2017} | Joaquin Ruacho- | da HJ L Hernandez | X Date & Sign |
| Dated: <u>○ </u> | <u>oC</u> /2017 | Patricia M | Medans edrano | X Date & Sign |

^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

Case 17-21219 Doc 1 Filed 07/17/17

Entered 07/17/17 15:59:28 Desc Main Page 58 of 60

Debtor 1

Joaquin

Case Number (if known)

First Name **List Your Unexpired Personal Property Leases** Part 2: For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Will the lease be assumed? Describe your unexpired personal property leases ☐ No Lessor's name: ☐ Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: ☐ No Lessor's name: Yes Description of leased property: Пио Lessor's name: ☐Yes Description of leased property: □No Lessor's name: □Yes Description of leased property: Lessor's name: ПNо ☐Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. * Arambusalo Hoz-

Date Dated: 67/06 /20 MM / DD / YYYY

Date _Dated: 67 / 05 /20 MM / DD / YYYY

Official Form 108

Record # 741123

Statement of Intention for Individuals Filing Under Chapter 7

Case 17-21219 Doc 1 Filed 07/17/17 Entered 07/17/17 15:59:28 Desc Main

DISCLAIMER Debtots have read and agree:

- 1. Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- 2. Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- 3. Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signers and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIOUIDATED to pay your creditors.
- 4. TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met:

 (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankruptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.

18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ, CHECK, & MAKE/SURE OUR PETITION IS ACCURATE!!!!

Dated: 07/ 06 /2017

Dated: 07/ 6/2017

Joaquin Ruacho-Hernandez

Patricia Medrano

X Date & Sign

X Date & Sign

Record # 741123

Asset Disclosure Page 1 of 1

Form B 201A, Notice to Consumer Debtor(s)

In re Joaquin Ruacho-Hernandez and Patricia Medrano / Debtors

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 07 / 06 /2017 | Jacquelleral 182 | X Date & Sign. |
|-----------------------------|---------------------------------|----------------|
| | Joaquin Ruacho, Hernandez | |
| Dated <u>07 / 06 /</u> 2017 | patien Medano S. | X Date & Sign |
| | / Patricia Medrano | |
| Dated: 7 6 /2017 | | _ |
| | Attorney: Joseph Mark D'Onofrio | |

Record # 741123